

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 NOV 30 AM 9:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 097000006464

1. Corporation Name

Northwest Florida Officials Association

2. Principal Office Address

4870 Rocks Drive

Suite, Apt. #, etc.

City & State

MARIANNA FL

Zip

32446

Country

USA

3. Mailing Office Address

4870 Rocks Drive

Suite, Apt. #, etc.

City & State

MARIANNA FL

Zip

32446

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida 1995?

5. FEI Number

59 303 2109

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Gerald A. Kelly Jr.

Street Address (P.O. Box Number is Not Acceptable)

4870 Rocks Drive

Suite, Apt. #, Etc.

City

MARIANNA

State

FL

Zip Code

32446

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Gerald A. Kelly Jr.

REGISTERED AGENT MUST SIGN

Date 29 Nov 04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Gerald A. Kelly Jr.	4870 Rocks Drive	MARIANNA, FL 32446
T	Timothy Hewitt	5265 Font Rd.	Grainwood, FL 32448
P	Art Porep	2929 Wildwood Circle	Marianna, FL 32448
V	Jeff Faircloth	2043 Cemetery Ave	Suwanee, FL 32460
D	Charly Mabardy	121 Hickory St	Chattahoochee, FL 32324
D	Reid Brooklett	3192 Diana Lane Apt 2	MARIANNA, FL 32446

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Gerald A. Kelly Jr. Gerald A. Kelly Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

29 Nov 04

Daytime Phone #

850-569-5260

CR2E081 (01/04)