

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT

 **FLORIDA DEPARTMENT OF STATE**
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000006941

1. Corporation Name

TREASURE ISLAND BUSINESS ASSOCIATION, INC

2. Principal Office Address

12520 4TH STREET EAST

Suite, Apt. #, etc.

City & State

TREASURE ISLAND, FLORIDA

Zip

33706

Country

U.S.A.

3. Mailing Office Address

138 107TH AVENUE

Suite, Apt. #, etc.

P.O. Box 195

City & State

TREASURE ISLAND, FLORIDA

Zip

33706

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

2000

5. FEI Number

59-3483024

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

GEORGE FIBER

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

12520 4TH STREET EAST

Suite, Apt. #, Etc.

City

TREASURE ISLAND,

State

FL

Zip Code

33706

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

George Fiber

Date 04/17/03

REGISTERED AGENT MUST SIGN

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	KENNETH BROWN	10217 PARADISE BLVD.	TREASURE ISLAND, FLORIDA 33706
S	DAVID GREGG	286 107TH AVENUE	TREASURE ISLAND, FLORIDA 33706
T	GEORGE FIBER	12520 4TH STREET EAST	TREASURE ISLAND, FLORIDA 33706
VP	HOWARD KNOWLES	GULF BLVD.	TREASURE ISLAND, FLORIDA 33706

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)(f), 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:

George Fiber GEORGE FIBER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/17/03

Date

727-360-8556

Daytime Phone #

CR2E081 (10/02)

04/17/03 2/2

To Whom It May Concern,

WE DID NOT RECEIVE THE FORM FOR 2002
FIRST OR SECOND NOTICE, COULD YOU PLEASE WAIVE
THE \$175⁰⁰ REINSTATEMENT FEE?

THANK YOU IN ADVANCE

George Fiber