

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **1798000001440**

1. Corporation Name

Theodore Roosevelt Society, Inc.

2. Principal Office Address

2040 Laurel Street

3. Mailing Office Address

2040 Laurel Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tallahassee, Florida

City & State

Tallahassee, Florida

Zip

32303

Country

U.S.A.

Zip

32303

Country

U.S.A.

**4. Date Incorporated or Qualified
To Do Business in Florida**

03/09/1998

5. FEI Number

59-3506356

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

Noah Valenstein

Street Address (P.O. Box Number is Not Acceptable)
2040 Laurel Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32303

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

June 29, 2005

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/D/C	Noah D Valenstein	2040 Laurel Street	Tallahassee, Florida 32303
V/D	William F Lamee	4808 22nd Avenue West	Bradenton, Florida 34209
T/D	Leonard C Zeiler	2220 Mandrell Place	Tallahassee, Florida 32303
S/D	Brett Cyphers	3215 King William Circle	Seffner, Florida 33584
D			
D			

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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Noah D. Valenstein

Date

June 29, 2005

850-251-2116

Daytime Phone #

CR2E081 (01/05)

2gr

June 29, 2005

Noah D. Valenstein
2040 Laurel Street
Tallahassee, FL 32303

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Reinstatement Fees for the "Theodore Roosevelt Society"

To whom it may concern:

The Theodore Roosevelt Society did not receive a request for annual payment during the year of 2001. I respectfully request that you wave \$175 from the cost of the attached reinstatement. A check for \$306.25 is attached along with the reinstatement form, reflecting the annual fees since the year 2001. If you have any questions please contact me at the phone number listed below.

Sincerely,



Noah D. Valenstein
President, Theodore Roosevelt Society
850-251-2116