

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
The Office of the
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 DEC 16 AM 9:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000006754

1. Corporation Name

DUNEDIN HIGH SCHOOL BOYS BASKETBALL BOOSTER CLUB, INC.

Principal Place of Business

Mailing Address

1651 PINEHURST RD
DUNEDIN FL 34698

1651 PINEHURST RD
DUNEDIN FL 34698



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
DUNEDIN, FLA

Zip

Country

Zip
34698

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

11/23/1998

5. FEI Number

59-3548610

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a certificate of status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D Pres	Gene P. Borden D	1286 Stony Brook Ln	Dunedin, Fla 34698
D Vice Pres	Dean Anderson D	2046 Brenda Rd	Clearwater, Fla 33755
D Sec Treas	Sherry Schairbly D	989 San Salvador Dr	Dunedin, Fla 34698

8. Name and Address of Current Registered Agent

JOHNSON, KYLE
1651 PINEHURST RD
DUNEDIN FL 34698

9. Name and Address of New Registered Agent

Name Gene P. Borden
Street Address (P.O. Box Number is Not Acceptable)
1286 Stony Brook Ln
Suite, Apt. #, Etc.
City DUNEDIN
State FL Zip Code 34698

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Gene P. Borden

Date 11/24/99

REGISTERED AGENT MUST SIGN

11. 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:

Gene P. Borden Pres Gene P. Borden

Date

11/24/99

Daytime Phone #

1-800-282-0001

11/24/99

Florida Division of Corporation
PO Box 6327
Tallahassee, FL 32314-6327

RE: Dunedin High Boys Basketball Booster Club

To whom it may concern:

We have been informed of the dissolution of our corporation due to improper filing. We failed to list a third officer of our corporation. Enclosed you will find the form that has been completed per your instruction. We ask that our corporation be re-instated. Proper fees were previously remitted. We await your response.

Sincerely,



Gene P. Bodden
President