PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS THEO
TELRETARY OF STATE
TISTON OF CORPORATION

00 OCT 27 PM 2:15

DOCUMENT #

N98000006947

1. Corporation Name

DUNEDIN HIGH SCHOOL GIRLS SOFTBALL BOOSTER CLUB , INC.

SANDRA M. O'CONNETL

Principal Place of Business

Mailing Address

1851 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.						REINSTATEMENT O				
			ng Office Address, If Applicable			4. Date Incorporated or Qualified To Do Business in Florida				
Suite, Apt. #, etc. Suite, Apt. #, 13/0 W/LDW0DD CT. /3/0			etc. WILDWOOD CT			10 Do Business in Florida 12/07/1998 5. FEI Number 59 - 367670 Applied For				
City & State City & State			BIN, FLORIDA 6.				APPEIED FOR Not Applicable			
Zip 34698 Country USA 34698		8 Country USA			CERTIFICATE OF STATUS DESIRED S8.75 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)										
Title(s) 1	Name of Officers and/or Directors 2		Street Address of Each Officer and/or Director 3				City / State / Zip			
PD - D	MISILMERI, DENISE JANDEA O'CONNECL		1851 PINEHURST RD 1310 W!しいののか(ct	DUNEDIN FL			
₫ ₽	McCarthy, Dek	1651 PINEHURST RD 1011 Weathersfield Dr			DUNEDIN FL					
\$ D	KALAJAINEN, LINDA CONROY, CATHY	1651 PINEHURST RD- 1520 B/G BASS			,	DUNEDINFL TARPON SPRINGS, FL				
ħΔ	CABRERA, EDITH STEELE, JONELL			1651 PINEHURST RD 2068 JAN MARNO WAY			DUNEDIN FL CLEAR WATER, FL			
				600003471086- -11/20/0001140(****236.25 *****236.25					867 0008 **236.25	
8. Name and Address of Current Registered Agent						9. Name and Address of New Registered Agent				
JOHNSON, KYLE 1651 PINEHURST RD. DUNEDIN FL 34698				Name JANDRA M. O'CONNEU Street Address (P.O. Box Number is Not Acceptable) /3/0 W/LDWOO M Suite, Apt. #, Etc.						
					City DUNES/N State Zip Code 3 4698			4698		
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										
REGISTERED AGENT MUST SIGN								<u>, </u>		
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 filling 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.										