

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

10 MAR -8 PM 1:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P07000091526

1. Corporation Name

Sand A Secret Society, Inc.

REINSTATEMENT 08-16

600170454896
02/24/10--01037--003 ***300.00
CR2E081 (11/09)

2. Principal Office Address - No P.O. Box #

9624 N. Harbys Dr.

Suite, Apt. #, etc.

N/A

3. Mailing Office Address

9624 N. Harbys Dr.

Suite, Apt. #, etc.

N/A

City & State

Tampa, Florida

City & State

Tampa, Florida

Zip

33617

Country

USA

Zip

33617

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida 8/15/07

5. FEI Number

26-0653012

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

APRIL COBB

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

9624 N. Harbys Dr.

Suite, Apt. #, etc.

N/A

City

Tampa, Florida

State

FL

Zip Code

33617

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

600170454896
03/09/10--01001--006 ***150.00

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 2/18/10

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,V,T,D	APRIL COBB	9624 N. Harbys Dr.	Tampa, FL 33617
S,D	KIA HOLDER	9405 unit A, Goldenrod Rd.	Thonotosassa, FL 33592
M	Shawnetta Franklin	3206 E. FERN ST.	TAMPA, FL 33610
M	Geri Wimley	11139 Normandy Circle #2	TAMPA, FL 33617

3/9

10. E-mail Address: Secretsociety-09@yahoo.com

(To be used for future annual report notification)

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. I further certify 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

Date 2/18/10

8133529531

Daytime Phone #