

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000050806

1. Corporation Name

SOUTH FLORIDA JAZZ & SWING SOCIETY, INC.

97 NOV 18 AM 8:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

~~10433 N.W. 3RD PLACE~~
~~CORAL SPRINGS FL 33071~~

~~10433 N.W. 3RD PLACE~~
~~CORAL SPRINGS FL 33071~~

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

2. New Principal Office Address, If Applicable

7564 LEXINGTON CLUB BLVD

3. New Mailing Office Address, If Applicable

PO BOX 6135

Suite, Apt. #, etc.

Suite, Apt. #, etc.

A

City & State

DELRAY BEACH, FL

City & State

DELRAY BEACH, FL

Zip

Country

33446

US

Zip

Country

33482

US

4. Date Incorporated or Qualified
To Do Business in Florida

06/13/1996

5. FEI Number

65-0703897

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	KURT STERN	7564 LEXINGTON CLUB BLVD #A	DELRAY BEACH, FL 33446
P/D	GERTRUDE KORNBLAU	5683 SWAYING PALM LANE	BOYNTON BEACH, FL 33437
V/D	LOUIS BARONE	3422 NW 47th AVE	COCONUT CREEK, FL 33063
T/D	JERRY ATLAS	10921 LAKEMORE LANE #B	BOCA RATON, FL 33498
<p>2000002353542--8 -11/21/97-01004--001 ***750.00 ***750.00</p>			

REINSTATEMENT (97)

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BELL, JOSEPH
10433 N.W. 3RD PLACE
CORAL SPRINGS FL 33071

Name

TANIA FLANIGAN

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

9390 SW 61 WAY #C

Suite, Apt. #, Etc.

City

BOCA RATON

State

FL

Zip Code

33428

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

Tania Flanigan

REGISTERED AGENT MUST SIGN

Date

November 14, 1997

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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:

Kurt Stern

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/14/97 561-499-9976

Date

Daytime Phone #

CR2040 (8/97)