APPLICATION FOR REINSTATEMENT 98 NR

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

FILED
98 DEC 17 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97 00002160 9

1. Corporation Name: TFT Foundation, Inc.

Principal Place of Business: 7200 Mimosa Grove Trail W. Jacksonville, Fla. 32210

Mailing Address: SAME

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	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida: 3/10/1997

5. FEI Number: ☒ 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D/P/T	Roy Tolliver	7200 Mimosa Grove Trail W.	Jacksonville, Fla. 32210
VP/S	Earnest Tolliver	7200 Mimosa Grove Trail W.	Jacksonville, Fla. 32210

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****150.00 ****150.00

8. Name and Address of Current Registered Agent

1

9. Name and Address of New Registered Agent

Name: Roy Tolliver
Street Address (P.O. Box Number is Not Acceptable): 7200 Mimosa Grove Trail W.
Suite, Apt. #, Etc.:
City: Jacksonville State: FL Zip Code: 32210

CR2E040 (1/98)

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: Roy M. Tolliver — Date: 12/15/98
REGISTERED AGENT MUST SIGN

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: Roy M. Tolliver — Date: 12/15/98
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #

12/15/98

(2)

Re: T.F.T. Foundation Inc.
Reinstatement

To Whom it May Concern,

Please be Advised that Neither I nor my Mother, Rosa Adams have received any notice for filing an Annual Report or notice of dissolution before being Advised by a Closing Attorney today. And Ask that you waive the Reinstatement penalties and other Related Charges.

Roy H. Tolliver
president T.F.T Foundation Inc.

NOTARY PUBLIC STATE OF FLORIDA
DALE A. BEARDSLEY
COMMISSION # CC774571
EXPIRES NOV 21, 2002
BONDED THROUGH
ADVANTAGE NOTARY