

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 OCT 19 AM 9:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000099172

1. Corporation Name

FUN AND UNIQUE FUNDRAISING CORPORATION

Principal Place of Business

Mailing Address

6401 BAKER ROAD
KEYSTONE HEIGHTS FL 32656

6401 BAKER ROAD
KEYSTONE HEIGHTS FL 32656



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

4. Date Incorporated or Qualified
To Do Business in Florida

11/23/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FSI Number

Applied For

City & State

City & State

59-3548916

Not Applicable

Zip

Country

Zip

Country

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
Pres	John Gray	6401 BAKER RD - KEYSTONE HTS	FL 32656

600003027026--2
-10/27/99--01098--004
****150.00 ****150.00

LS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

GRAY, JOHN
6401 BAKER ROAD
KEYSTONE HEIGHTS FL 32656

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

John Gray

REGISTERED AGENT MUST SIGN

Date 10-15-99

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)(l), 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:

John Gray JOHN GRAY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-15-99 352-475-2922

Date

Daytime Phone #

2

D.M. Smith & Company

Certified Public Accountants

2531-A NW 41st Street

Gainesville, FL 32606

352-377-5566

October 14, 1999

Florida Department of State
Katherine Harris
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE:Fun and Unique Fundraising Corporation -- Reinstatement Application

Dear Ms. Harris:

We are writing to request reinstatement of the above referenced corporation without penalty for reasonable cause.

The shareholder of this corporation relocated to Florida from Georgia in 1998 and moved to a rural area. For about a year, the mail delivery was less than perfect. As a result of the name of the corporation being different than the shareholder this, Notice of administrative Dissolution was just received. This corporation has had no activity and has not filed any tax returns.

Please accept the original filing fee of \$150.00 and waive the penalty.

Sincerely,
D.M. Smith & Co.
Certified Public Accountants

Dennis M. Smith, CPA