

**2017 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N95000005313

**FILED  
Sep 02, 2017  
Secretary of State  
CR3695364523**

**Entity Name:** ASSOCIATION FOR DISABLED AMERICANS, INC.

**Current Principal Place of Business:**

6301 JEFFERSON STREET  
HOLLYWOOD, FL 33023

**Current Mailing Address:**

6301 JEFFERSON STREET  
HOLLYWOOD, FL 33023 US

**FEI Number:** 65-0646620

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BASTIE, GARY  
523 59TH STREET S  
ST PETERSBURG, FL 33707 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** GARY BASTIE

09/02/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DIRECTOR, PRESIDENT  
Name           BASTIE, GARY  
Address        523 59TH STREET S  
City-State-Zip: ST PETERSBURG FL 33707

Title           DIRECTOR, VP  
Name           CHAPMAN, DANIEL  
Address        2236 COTTONDALE AVENUE  
City-State-Zip: SPRING HILL FL 34608

Title           DIRECTOR, TREASURER,  
SECRETARY  
Name           BASTIE, R  
Address        523 59TH STREET S  
City-State-Zip: ST PETERSBURG FL 33707

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** R BASTIE

D,T,S

09/02/2017

Electronic Signature of Signing Officer/Director Detail

Date