

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

FILED
99 AUG 30 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 730160

1. Corporation Name
THE FLORIDA MOTION PICTURE & TELEVISION ASSOCIATION, INC

Principal Place of Business Mailing Address

000002977670--5
-03/02/99--01101--002
****245.00 ****245.00

REINSTATEMENT 99^(A)

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

2. New Principal Office Address, If Applicable 392 LAKEVIEW TERR Suite, Apt. #, etc.	3. New Mailing Office Address, If Applicable 392 LAKEVIEW TERR Suite, Apt. #, etc.	4. Date Incorporated or Qualified To Do Business in Florida 06/25/1974
City, State PALM HARBOR, FL 34683	City, State PALM HARBOR FL	5. FEI Number 59-2301231
Zip 34683	Country US	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>	\$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
PD	CRAIG SOLDINGER	422 NETHERWOOD CRES	ALTAMONTE SPGS, FL 32714
EVD	JERRY ALAN	1206 AUTUMN DRIVE	TAMPA FL 33613
VD	KAREN MARSHALL	2000 UNIV. STUDIOS PLAZA SUITE 625	ORLANDO FL 32819
TD	DALE W JOHNSON	392 LAKEVIEW TERR.	PALM HARBOR, FL 34683
SD	HELEN ESTES	3804 CARDINAL CIRCE	BONITA SPRINGS, FL 34134

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name DALE W. JOHNSON
Street Address (P.O. Box Number is Not Acceptable) 392 LAKEVIEW TERR
Suite, Apt. #, Etc.
City PALM HARBOR
State FL
Zip Code 34683

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

Dale W. Johnson
REGISTERED AGENT MUST SIGN

Date 8/23/99

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:

Dale W. Johnson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
DALE W. JOHNSON
TREASURER/DIRECTOR

8/23/99
Date

727-787-1464
Daytime Phone #

KE

CR2E040 (1/98)