PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
11 OCT 11 PM 12:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 823746

1. Corporation Name And
National Parks Conservation Association

B 10/12/11
REINSTATEMENT
10-11

CR2E081 (11/10)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
777 6th Street NW	777 6th Street NW
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Suite 700	Suite 700
City & State	City & State
Washington, DC	Washington, DC
Zip / Country	Zip / Country
20001 / USA	20001 / USA

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number: 53-0225165 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number Is Not Acceptable): 1200 South Pine Island Road

Suite, Apt. #, Etc.:

City: Plantation | State: FL | Zip Code: 33324

700210662077
08/03/11--01003--002 **245.00

800213189798
10/11/11--01002--003 **61.25

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: Daniel J. Mercovits, Asst. Secretary Date: 9/28/2011
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Thomas Kiernan	777 6th Street NW, St 700	Washington, DC 20001
EV	Theresa Pierno	777 6th Street NW, St 700	Washington, DC 20001
SV	Ronald Tipton	777 6th Street NW, St 700	Washington, DC 20001
T	Norman Selby	777 6th Street NW, St 700	Washington, DC 20001
S	John Huerta	777 6th Street NW, St 700	Washington, DC 20001
D	Alan Lacy	777 6th Street NW, St 700	Washington, DC 20001

10. E-mail Address: cgarcia@npca.org
(To be used for future annual report notification)

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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as it made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE: Theresa Pierno 10/4/11 202 454-3301
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #