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CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000000142

1. Corporation Name
The National Abortion and Reproductive Rights Action League Foundation, Inc.

2. Principal Office Address 1156 15th Street, NW		3. Mailing Office Address 1156 15th Street, NW	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Washington DC		City & State Washington DC	
Zip 20005	Country USA	Zip 20005	Country USA

REINSTATEMENT 00-04

4. Date Incorporated or Qualified To Do Business in Florida 1/10/94

5. FE Number 521100361 Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee if applied 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

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0605 or 617.0603, F.S.

Signature of Registered Agent *Connie Burtin* **CONNIE BURTON** SPECIAL ASSISTANT SECRETARY Date 9/24/04
REGISTERED AGENT MUST SIGN

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President	Elizabeth Cavendish	1156 15th Street, NW, Suite 700	Washington DC 20005
Chair	Richard Gross	1156 15th Street, NW, Suite 700	Washington DC 20005
vicechair	Nancy Silverman	1156 15th Street, NW, Suite 700	Washington DC 20005
vicechair	Dagnar Dolby	1156 15th Street, NW, Suite 700	Washington DC 20005
Sec/Tre	G. Angela Henry	1156 15th Street, NW, Suite 700	Washington DC 20005
CFO	John Borts	1156 15th Street, NW, Suite 700	Washington DC 20005

10. I certify that I am an officer or director or one receiver or trustee empowered to execute this application as provided for in chapters 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 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 118.07(3)(b), 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 M. Borts* **JOHN M. BORTS** Date 9/29/04 202.933.3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytona Phone #

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**Florida Department of State
Division of Corporations
Public Access System**

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CORPORATION REINSTATEMENT

THE NATIONAL ABORTION AND REPRODUCTIVE RIGHTS ACTION

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