

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

03 DEC 11 PM 1:05

DOCUMENT # N01000001306

1. Corporation Name ECONOMIC NATIONAL UNDERPRIVILEGED FOUNDATION, INC.

REINSTATEMENT 03 10/31/03 01007 009 61.25

2. Principal Office Address 5764 N. ORANGE BLOSSOM TRAIL Suite. Apt. # etc. 105 City & State ORLANDO, FL Zip 32810 Country U.S.A. 3. Mailing Office Address 5764 N. ORANGE BLOSSOM TRAIL Suite. Apt. # etc. 105 City & State ORLANDO, FL Zip 32810 Country U.S.A.

4. Date incorporated or Qualified To Do Business in Florida 5. FEI Number 95-4430262 Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for Certificate of Status

7. Name and Address of Current Registered Agent Name J. FITZGERALD HENDERSON Street Address (P.O. Box Number is Not Acceptable) 5764 N. ORANGE BLOSSOM TRAIL Suite, Apt. #, Etc. 105 City ORLANDO State FL Zip Code 32810

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 Date 11/17/03 REGISTERED AGENT MUST SIGN

Table with 4 columns: Title, Name of Officers and/or Directors, Street Address of Each Officer and/or Director, City / State / Zip. Rows include DAVID JOHNSON, ZULMA VELEZ-ESTRADA, JOHN SCHRENKER, CPA, CFP, DESHAWN ANDERSON, J. FITZGERALD HENDERSON, FLOYD FRAZIER.

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: David Johnson 11/14/03 (407) 719-8723 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

12/11/03

**ENUF**

Economic National Underprivileged Foundation  
207 M. A. Board # 20  
Apopka, Florida 32703  
[www.4enuf.org](http://www.4enuf.org)  
407-252-1669

To: Division of Corporations

From: Director John Henderson

To Whom It May Concern:

Our organization has new Officers and a new mailing address. Please wave the Reinstatement Fee due to the fact that the mailings were sent to Si L. Henderson a past Director who negated to forward the UBR to the Board.

We are enclosing the appropriate information with the \$61.00 dollars needed to pay for this year.

Sorry for the inconvenience,



John F. Henderson  
Director/CEO