CR2E040 (8/00)

PLEASE READ ALL INSTRUCTIONS BEFORE CO							NG THIS FORM.	INCO	
APF	PLICATION		th Secret	RTMEN ne fi	tate		FILED	1012	
DIVISION OF CORPORATIONS									
DOCUMENT # N39892  1. Corporation Name						00 OCT 19 AM 9: 23			
COMMUNITIES IN SCHOOLS OF BROWARD COUNTY, INC.						SECRETARY OF STATE TALLAHASSEE FLORIDA			
Principal Place of Business Mailing Address								hran atak atak bisi 1881	
4861 N DIXIE HWY STE 200-0 OAKLAND PARK FL 33334 US US If above addresses are incorrect in any way, line through incorrect in			ARK FL 33334						
			ng Office Address, If Applicable			Date Incorporated or Qualified     To Do Business in Florida     09/07/1990			
Suite, Apt. #, etc. Suite, Apt. #			etc.			5. FEI Number	5. FEI Number Applied For		
City & State		City & State	City & State			65-0216677 Not Applicable			
Zip	Country Zip						CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status		
7. Names a				ida nonprofit corporations must list at least 3 directors  Street Address of Each Officer and/or Director			000034431490 -11/02/00-01011011 4 *****61.25		
TD	FARMER, GERALD	6711 N.	6711 N. OCEAN BLVD. #8			OCEAN RIDGE FL 33435			
<b>₫</b> D	O'CONNELL, ANNE	1500 NV	1500 NW 49 ST			FT. LAUDERDALE FL 33309			
D	OESTREICHER, RON	777 AMERICAN EXPRESS WAY				FT. LAUDERDALE FL 33301			
SD	ELKIN, STEVE- JAMES, BICC			-110 S.E. 8 STREET #/00 7777-8 DAVIE 40. EXT			FT. LAUDERDALE FL 333 HOLLYLOCOD FC	33024	
PD	BRADLEY, ANDREA- MICHAEL FLATLE	4790 N. STATE RD. 7 4861 NOIXIE HWY FRODD			#200D	FT. LAUDERDALE FE 333	19 FL 33334		
ed D	MCNALLY, PHILIP G			600 S.E. THIRD AVENUE			FT. LAUDERDALE FL 33301		
8. Name and Address of Current Registered Agent Name						9. Name and Address of New Registered Agent			
BRADLEY, ANDREA 4861 N DIXIE HWY STE 200-D OAKLAND PARK FL 3334					Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.  SUITE 200 D  City  State Zip Code				
	appointed the registered agent of the	above named com	oration, am	familiar wi	OAKL AND	Digations of Secti	<pre> ⟨   FL   </pre>	33334	

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., 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:

Signature of Registered Agen

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REGISTERED AGENT MUST SIGN





October 13, 2000

To whom it may concern:

Earlier this year I sent our filled in Uniform Business Report for our non-profit corporation with several changes. This week I received a notice of dissolution. I remember filling out the form and mailing it to you but I can not recall weather I enclosed a check and can find no record of one being written. I can only assume I failed to include the check although I am sure I sent the form. This event happened during a confusing time. I had major cancer surgery on April 17, 2000 at The University of Miami's Cedars surgical center (Dr. Soloway) and my attention to detail was not the best. I am asking you to please waive the fine and am sending the reinstatement form along with our annual fee. I appreciate any consideration you can give us as we are a small 501©3 who work with at-risk children in the schools.

Sincerely,

Michael Flatley
Executive Director

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