PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 NOV 15 AM 9:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N44678**

1. Corporation Name

MEETING PROFESSIONALS INTERNATIONAL INCORPORATED

Principal Place of Business	Mailing Address
~~5600 GULF BLVD~~ ~~ST. PETERSBURG BEACH FL 33706~~ ~~US~~	~~5600 GULF BLVD~~ ~~ST. PETERSBURG BEACH FL 33706~~ ~~US~~

100003053261--7
-11/23/99--01061--010
****245.00 ****245.00

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

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc. 1114 E. Boyer St.	Suite, Apt. #, etc. 1114 E. Boyer St.
City & State Tarpon Spr Fl	City & State Tarpon Spr Fl
Zip 34689 Country USA	Zip 34689 Country USA

4. Date Incorporated or Qualified To Do Business In Florida: 06/12/1991

5. FEI Number: 31-1135141 ☐ Applied For ☐ Not Applicable

6. [redacted] $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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P D	~~LAMM, TAMMY~~ 104 Peterson	~~5600 GULF BLVD~~ 6313 Benjamin Rd Ste 110	~~ST PETERSBURG BEACH FL~~ Tampa Fl
D D	~~SMITH-GONZALEZ, SHELLY~~ OK as is	~~1201 GULF BLVD~~ OK as is	~~CLEARWATER FL~~ OK as is
S D	~~MORGAN, LORI~~ Joanne Dowell	~~2203 40TH ST. W~~ 880 Carillon Pkwy	~~BRADENTON FL~~ St. Petersburg Fl
T D	~~GRAVES, KATIE~~ Virginia B. Phillips	~~2717 SEVILLE BLVD, #16101~~ 1114 E. Boyer St.	CLEARWATER FL Tarpon Spr Fl 34689
D	~~BLAIR, SUSAN~~	~~1100 GULF BLVD~~	~~CLEARWATER FL~~
D	PLANZ, JOE	TWO TAMPA CITY CENTER	TAMPA FL

8. Name and Address of Current Registered Agent

GG. TS
REINSTATEMENT
GRAVES, KATIE
2717 SEVILLE BLVD, #16101
CLEARWATER FL 34624

9. Name and Address of New Registered Agent

Name: Virginia B. Phillips
Street Address (P.O. Box Number is Not Acceptable): 1114 E. Boyer St.
Suite, Apt. #, Etc.:
City: Tarpon Spr Fl State: FL Zip Code: 34689-5504

CR2E040 (8/99)

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: Virginia B Phillips Date: 10-29-99
REGISTERED AGENT MUST SIGN

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: Virginia B Phillips 10/29/99 813-974-6684
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #