

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

APPLICATION
 FOR
 REINSTATEMENT

DOCUMENT # **N94000005849**

1. Corporation Name

FOR PURPOSE, INC.

FILED

97 FEB -7 PM 12: 56

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
800002081868--U
 -02/10/97--01003--003
 ****297.50 ****297.50

Principal Place of Business

Mailing Address

**7132-25 PENNER LANE
 Ft Myers, Fl 33907**

**7132-25 PENNER LANE
 Ft Myers, Fl 33907**

REINSTATEMENT 96-97 2/7/97

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		4. Date Incorporated or Qualified To Do Business in Florida 11-29-1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 65-059147	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres(D)	Myers, Robert K. President	7132-25 PENNER LANE	Ft. Myers, Fl. 33907
V. Pres(D)	Ashton, Jan V. Pres.	7132-25 PENNER LANE	Ft. Myers, Fl. 33907
Sec(D)	KAREN Malfregeot Secretary	925 FLAMINGO AVE	Stuart Fl. 34996
Treas(D)	Jonnie-Ruth Kuhn (KUHN) Treasure	4260 SE Whiticar Way	Stuart, Fl 34997
(D)	DAMIEN Oniele	4260 SE Whiticar Way	Stuart, Fl. 34997

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
JAN ASHTON 7132-25 PENNER LANE Ft. Myers, Fl 33907		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, Etc.	
		City	State FL

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: Jan Ashton REGISTERED AGENT MUST SIGN Date: 2-5-97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No (See other side for information on intangible tax.)

12. 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: Jan Ashton SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 2-5-97 Daytime Phone #: 941-275-3644

CR2E040 (12/96)