


2001

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

**APPLICATION FOR REINSTATEMENT**



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

**DOCUMENT # P33026**

1. Corporation Name  
**POINTS OF LIGHT FOUNDATION "INCORPORATED"**

**FILED**  
 01 NOV -9 AM 10:34  
 SECRETARY OF STATE  
 TALLAHASSEE FLORIDA

Principal Place of Business	Mailing Address
POINTS OF LIGHT FOUNDATION 4400-EYE ST., NW STE 800 WASHINGTON DC 20005	POINTS OF LIGHT FOUNDATION 4400-EYE ST., NW STE 800 WASHINGTON DC 20005



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

2. New Principal Office Address, If Applicable <i>Points of Light Foundation</i> Suite, Apt. #, etc. <i>1400 Eye St NW Ste 800</i> City & State <i>Washington DC</i> Zip <i>20005</i>	3. New Mailing Office Address, If Applicable <i>Points of Light Foundation</i> Suite, Apt. #, etc. <i>1400 Eye St NW Ste 800</i> City & State <i>Washington DC</i> Zip <i>20005</i>
---	---

4. Date Incorporated or Qualified To Do Business in Florida 03/05/1991	
5. FEI Number 65-0206641	Applied For Not Applicable
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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City
D	CHAMBERS, RAYMOND G.	310 SOUTH STREET	MORRISTOWN NJ
S	DIAMOND, JOSEPH	1675 BROADWAY, 24TH FL.	NEW YORK NY 10019
D	HEARD, MARIAN	736 JACKSON PLACE	WASHINGTON DC
D	ALBERTHAL, LESTER M.	5400 LEGACY DRIVE	PLANO TX
P	POINTS OF LIGHT FOUNDATION	1400 EYE ST., STE 800	WASHINGTON DC 20005
D	GARDNER, EDWARD L.	411 THEODORE FREMD AVE.	RYE NY

8. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State <b>FL</b> Zip Code
---	--

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0506, F.S.

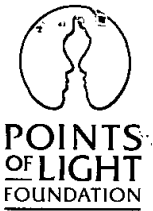
Signature of Registered Agent \_\_\_\_\_ Date \_\_\_\_\_  
 REGISTERED AGENT MUST SIGN

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: Rk Gardner  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

CPRE040 (8/01)

20/2



1400 I Street, NW  
Suite 800  
Washington, DC  
20005-6526  
  
PHONE 202-729-8000  
FAX 202-729-8100  
www.PointsofLight.org

Department of State  
Division of Corporations  
409 East Gaines St.,  
Tallahassee, FL 32399

Dear Florida State Department:

I'm am sending this letter stating that The Points of Light Foundation have not received any previous forms from your department. I called on Oct 31,2001 to verify the procedure for this delay. Your office instructed me to send a letter and a fee of 61.25 for reinstatement. If there are any questions, please contact me at 202-729-8109. Thank you for your cooperation.

Sincerely,

Renee Spriggs

A handwritten signature in black ink that reads "Renee Spriggs". The signature is written in a cursive style and is positioned to the right of the typed name.