•PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 OCT 31 PM 4:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000001026

1. Corporation Name

THE PALM BEACH COUNTY MIDDLE SCHOOL OF THE ARTS PTO, INC.

Principal Place of Business	Mailing Address
3701 NORTHSHORE DR. WEST PALM BEACH FL 33407	3701 NORTHSHORE DR. WEST PALM BEACH FL 33407

REINSTATEMENT 02

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	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 02/20/1998

5. FEI Number: 65-0828975 (Applied For / Not Applicable)

6. CERTIFICATE OF STATUS DESIRED ☐ $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	4 City, State / Zip
Co-PD	~~PHIPPS, SANDRA A~~ Suzanne Zwyssig	3701 NORTHSHORE DR.	WEST PALM BEACH FL 33407
~~VPD~~ CO-P,D	~~CARROL, SUE~~ Robin AKdeniz	3701 NORTH SHORE DR.	WEST PALM BEACH FL 33407
~~SD~~ VPD	~~FIONDA, USA DELA~~ MELINDA HANSEN	3701 NORTHSHORE DR.	WEST PALM BEACH FL 33407
T	~~STAINBACK, NANCY~~ Joseph Zambuto	3701 NORTHSHORE DR.	WEST PALM BEACH FL 33407
S	Karen Anthony	3701 Northshore Dr.	West Palm Beach, FL 33407

8. Name and Address of Current Registered Agent

PERLMAN, ELIZABETH
3701 NORTH SHORE DRIVE
WEST PALM BEACH FL 33407

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable): 200087365772

Suite, Apt. #, Etc: 117017O2--01011--011 **236.25

City | State: FL | Zip Code

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. or 617.0505, F.S.

Signature of Registered Agent: Elizabeth Perlman (REGISTERED AGENT MUST SIGN) Date: 10/25/02

11. I certify that I am an officer or director of 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: Zwyssig Suzanne Zwyssig 10/25/02 5615826044
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

no53593

JP 11/7/02

State of Florida
Department of State

CERTIFICATE OF ADMINISTRATIVE DISSOLUTION OR REVOCATION

The below named corporation having failed to file its 2002 corporation annual report/uniform business report, in accordance with Florida Statutes, is hereby administratively dissolved or revoked effective October 4, 2002.

Corporation Name: THE PALM BEACH COUNTY MIDDLE SCHOOL OF THE ARTS PTO, INC.

Document Number: N98000001026

Given under my hand and the Great Seal of the State of Florida, at Tallahassee, the Capital, this the 4th day of October, 2002.

Jim Smith
Secretary of State

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State

DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314

FIRST-CLASS MAIL
U.S. POSTAGE PAID
FLORIDA DIVISION OF CORPORATIONS

B058598 AV **AUTO T8 1 0610 33407-359901
N98000001026

TO:
THE PALM BEACH COUNTY MIDDLE SCHOOL OF THE ARTS
PTO, INC.
3701 NORTHSHORE DR.
WEST PALM BEACH FL 33407-3599