PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
02 JUL 15 PM 12:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REINSTATEMENT 01-02

DOCUMENT # 750176

1. Corporation Name

Florida Advisory Committee on Arson Prevention, Inc.

2. Principal Office Address		**3.** Mailing Office Address	
P.O. Box 1654		3625 NW 82 Avenue	
Suite, Apt. #, etc.		Suite, Apt. #, etc. Suite 306	
City & State: Winter Park, Florida		City & State: Miami, Florida	
Zip: 32790-1654	Country: US	Zip: 33166	Country: US

4. Date Incorporated or Qualified To Do Business in Florida: 12/12/79

5. FEI Number: 59-1743445 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: David Cowheard

Street Address (P.O. Box Number is Not Acceptable): 3625 NW 82 Avenue

Suite, Apt. #, Etc.: Suite 306

City: Miami | State: FL | Zip Code: 33166

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: David Cowheard — REGISTERED AGENT MUST SIGN — Date: 7/1/02

CR2E081 (9/01)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	William S. Berk	2601 S. Bayshore Dr., Suite 1600	Miami, Florida 33133
V	John Voelpel	2202 F. Currey Ford Rd.	Orlando, Florida 32306
S	Gina Smith	3520 Thomasville Rd., Suite 102	Tallahassee, FL 32308
T	David Cowheard	3625 NW 82 Avenue, Suite 306	Miami, Florida 33166
	Schedule attached		

10. 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: David Cowheard DAVID COWHEARD — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 7/1/02 — Daytime Phone #: 305-463-7978

7/15/02

Block 9

Titles	Names of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Director	Lori Popkin	600 N. Pine Island Rd., Suite 400	Plantation, Florida 32751
Director	Mary Fields	200 East Gaines Street	Tallahassee, FL 32399
Director	Kenneth Keebler	1901 Capri Road	Valrico, Florida 33594
Director	David Root	13930 Lynmar Blvd.	Tampa, Florida 33626
Director	Bill Watson	11331 San Jose Blvd.	Jacksonville, FL 32223
Director	Andrew Rock	851 Concourse Pkwy S., Suite 210	Maitland, FL 32752
Director	Barbara Slawiak	17200 Commerce Park Blvd.,	Tampa, Florida 33647
Director	Rick Walker	9000 Regency Square Blvd. Suite G-3	Jacksonville, FL 32211
Director	John Rodman	P.O. Box 622882	Oviedo, FL 32765
Director	Bob Paul	7401 Cypress Gardens Blvd.	Winterhaven, FL 33888