


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 01 OCT 19 PM 6:02

DOCUMENT # **F00000000938**
 1. Corporation Name
JERSEYANS AGAINST DRUNK DRIVING INC.

Principal Place of Business	Mailing Address
2458 COLUMBIA DR. SUITE 2 CLEARWATER FL 33763	2458 COLUMBIA DR. SUITE 2 CLEARWATER FL 33763

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02/17/2000	
City & State		City & State		5. FEI Number	
Zip		Country		22-3653545	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input checked="" 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 / State / Zip
1 PD	2 LIBES, RICHARD D	3 2458 Columbia Drive, Suite 2 Clearwater, FL 33763	4 DEAN GROVE NJ
CD	LABRIODA, APRIL	3 2458 Columbia Drive, Suite 2 Clearwater, FL 33763	VERBEN FL
S	JENKINS, BOB	302 1ST AVE.	ASBURY PARK NJ
T	LIBES, SHERRY	6010 BLVD WEST	WEST NY

100004661271--8
 -10/31/01--01060--012
 ****158.75 ****158.75
 10/30

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
LIBES, RICHARD D 2458 Columbia Drive, Suite 2 Clearwater, FL 33763		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City	
		State	Zip Code
		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 Richard Libes **SIGNATURE REQUIRED** Date 10-16-01
 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: Richard Libes **SIGNATURE REQUIRED** Date 10-16-01 (727) 669-6601
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CPRE040 (8/01)

Floridians Against Drunk Driving



A FL Non-Profit Organization

FADD Statewide Main Office 2458 Columbia Drive, Suite 2 Clearwater, FL 33763 1-888-239-9010

Be Safe, Don't Drink and Drive

10-16-01

FL. DEPT. OF STATE

I SPKE TO A WOMAN AT

(850) 245-6659 ON OCT. 12, 2001.

I EXPLAINED TO HER THAT WE NEVER
RECEIVED A RENEWAL APPLICATION AND WERENT
AWARE OF ONE. SHE TOLD ME TO
SEND A CHECK FOR \$150⁰⁰ WITH
AN EXPLANATION. IF YOU HAVE
ANY QUESTIONS, PLEASE CALL ME.

Sincerely,

Richard D. Libes
Executive Director