

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000002873

1. Corporation Name

The Amyotrophic Lateral Sclerosis Association, INC.

REINSTATEMENT 08-10

200172000132
03/12/10--01024--007 **367.50

CR2E081 (11/09)

2. Principal Office Address - No P.O. Box #

27001 Agoura Road

Suite, Apt. #, etc.

Suite 250

City & State

Calabasas Hills

Zip Country
91301-5104 USA

3. Mailing Office Address

27001 Agoura Road

Suite, Apt. #, etc.

Suite 250

City & State

Calabasas Hills

Zip Country
91301-5104 USA

4. Date Incorporated or Qualified
To Do Business in Florida

01/07/1985

5. FEI Number
13-3271855

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

Corporate Creations Network Inc.

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

11380 Prosperity Farms Road

Suite, Apt. #, Etc.

#221E

City State Zip Code
Palm Beach Gardens FL 33410

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

Diana Urrego, Special Secretary

Date 03/03/2010

REGISTERED AGENT MUST SIGN

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
Pres & CEO	Jane H. Gilbert	27001 Agoura Road, Suite 250	Calabasas Hills, CA 91301-5104
Chairman	Jay Daugherty	12214 Washington Court	Kansas City, MO 64145
Treas & CFO	Benjamin S. Ohrenstein	354 Lancaster Avenue, Suite 105	Haverford, PA 19041-1300
VP, Finance	John W. Applegate	27001 Agoura Road, Suite 250	Calabasas Hills, CA 91301-5104
Vice Chairman	Robin R. Ganzert	200 Market Street, Suite 1700	Philadelphia, PA 19103
Secretary	Laural Winston	37473 Sky Light Road	Palm Dessert, CA 92211-1337

10. E-mail Address: rabad@alsa-national.org

(To be used for future annual report notification)

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. I further certify, 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:

John W. Applegate, Vice President, Finance

03/03/2010

818-587-2225

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

03/15