

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 MAR 23 AM 8:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

W04-7953

DOCUMENT # F93000005821

1. Corporation Name

American Society of Humanistic
Education, Inc.

REINSTATEMENT 00-04

2. Principal Office Address

125 S. Swoope Ave.

Suite, Apt. #, etc.

#109

City & State

Maitland, FL

Zip

32751

Country

US

3. Mailing Office Address

125 S. Swoope Ave.

Suite, Apt. #, etc.

#109

City & State

Maitland, FL

Zip

32751

Country

US

4. Date Incorporated or Qualified
To Do Business in Florida

12/22/93

5. FEI Number

600029333196

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

02/25/04--01008--014 **420.00

7. Name and Address of Current Registered Agent

Name

George Von Hilsheimer

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

125 S. Swoope Ave

Suite, Apt. #, Etc.

#109

City

Maitland, FL 32751

State

FL

Zip Code

32751

600029333196

03/23/04--01095--001 **61.25

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

George Von Hilsheimer

Date

2/15/04

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.	Jonnice Mae Warner	160 W. Trotters Dr.	Maitland, FL 32751
V. PRES.	William Scorell	325 Michigan Ave	Deland, FL 32724
SEC. / TREAS.	Greg Gill	140 Lincoln Rd.	Deland, FL 32724
D	Dennis Warner	1616 Oranole Rd	Maitland, FL 32751
D	George Von Hilsheimer	160 W. Trotters Dr	Maitland, FL 32751
D	Derek Warner	2006 Lochbenny Rd	Winter Park, FL 32789

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:

Jonnice Mae Warner

Date

Daytime Phone #

Jonnice Mae Warner 2/15/04 407-660-2098

CR2E081 (10/02)