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TRANSMITTAL LETTER

TO: QUALIFICATION/REGISTRATION SECTION
DIVISION OF CORPORATIONS

SUBJECT: Driver of the Year Foundation, Inc.
(Name of corporation)

Dear Sir or Madam:

The enclosed "Application by Foreign Not For Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign nonprofit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

834520990
957 3580

Stephanie A. Reinicke, Esq.
(Name of Person)

Fournier, Pretschner & Reinicke, P.A.
(Firm/Company)

1800 Second Street, Suite 803
(Address)

Sarasota, FL 34236
(City, State and Zip Code)

300001373973
-01/09/95--01081--002
*****70.00 *****70.00

For further information concerning this matter, please call:

Ki Cuyler
(Name of Person)

at (813) 952-9399
Area Code & Daytime Telephone Number

pk 1/10

COURIER ADDRESS:
Qualification/Registration Sec.
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Qualification/Registration Sec.
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 10 AM 11:28

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR
AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZA-
TION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. DRIVER OF THE YEAR FOUNDATION, INC.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbrevia-
tions of like import in language as will clearly indicate that it is a corporation instead of a natural person or
partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate
suffix by a nonprofit corporation.)

2. PENNSYLVANIA

(State or country under the law of which it is incorporated)

3. 25-1706172

(FEI number, if applicable)

4. October 2, 1992

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or perpetual)

6. 1/1/95

(Date corporation first conducted affairs in Florida -
See sections 617.1501, 617.1502, and 617.155, F.S.)

7. P.O. Box 43

Longboat Key, FL 34228

(Current mailing address)

8. To promote and educate the general public regarding safe driving habits and practices;

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: raise funds for other charitable organizations dedicated to the promotion of safe driv-
ing habits and practices, and which assist victims of unsafe driving practices; and all
other purposes as defined by IRC §501(c)(3)

Stephanie A. Reinicke

(Name)

1800 Second Street, Suite 803

(Office address)

Sarasota

(City)

, Florida, 34236

(Zip Code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated
corporation at the place designated in this application, I hereby accept the appointment as
registered agent and agree to act in this capacity. I further agree to comply with the provisions
of all statutes relative to the proper and complete performance of my duties, and I am familiar
with and accept the obligations of my position as registered agent.

Stephanie A. Reinicke
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to
delivery of this application to the Department of State, by the Secretary of State or other official
having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
SECRETARY OF STATE
CORPORATIONS
SECTION 10
AUG 11 1992

12. Names and addresses of officers and/or directors:

A. DIRECTORS

Chairman: Ki Cuyler

Address: P.O. Box 43, 2987 Babcock Blvd, Pittsburgh, PA 15237
Longboat Key, FL 34228

Vice Chairman: _____

Address: _____

Director: XXXXXXXXXX

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Ki Cuyler

Address: P.O. Box 43
Longboat Key, FL 34228

Vice President: _____

Address: _____

Secretary: Ki Cuyler


Address: P.O. Box 43
Longboat Key, FL 34228

Treasurer: Ki Cuyler

Address: P.O. Box 43
Longboat Key, FL 34228

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.



(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

Ki Cuyler

(Typed or printed name and capacity of person signing application)

COMMONWEALTH OF PENNSYLVANIA



Department of State

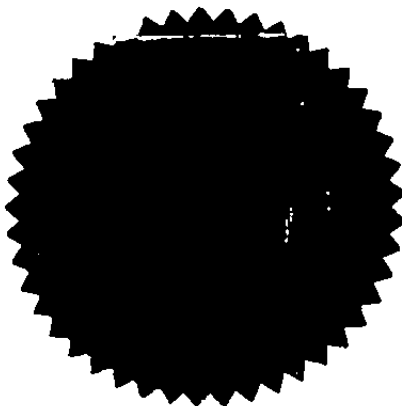
12/23/1994

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

DRIVER OF THE YEAR FOUNDATION, INC.

is duly incorporated under the laws of the Commonwealth of Pennsylvania and remains a subsisting corporation so far as the records of this office show, as of the date herein.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Robert M. Lunt

Secretary of the Commonwealth

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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