		:VD VII ING.	TOLICTIONS	DEEODE (OMPLET	ING THIS FO	BONE
4	.ICATION FOR		A DEPARTME Sandra B. Mon Secretary of S	NT OF STATE rtham		fí	LEO - EM 8: 27
			IVISION OF CORPORATIONS		}	SECRETARY OF STATE FALLAHASSEE, FLORIDA	
DOCUMENT # F9600002052 1. Corporation Name					ALLAHASSEE, FLORIDA		
HUMAN RIGHTS CAMPAIGN, INC.							
Principal Place of Business Mailing Add			ress		_		
			STREET NW DN DC 20005				
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					RFIN	STATEN	IENT 98
2. New Principal Office Address, If Applicable 3. New M. Suite Address State S			ing Office Address, If	Applicable TWW	4. Date Incorp To Do Busir	orated or Qualified ness in Florida	04/24/1996
Sittle GOO Si			£ 000	2	5. FEI Number	52-1243457	Applied For Not Applicable
Zip 2/200	County A	WHS#	Country Country	VSA	6. CERTIFICATE	OF STATUS DESIRED	\$8.75 Additional Fee required
7. Names and	Street Addresses of Each Offic						
Title(s)	Name of Offic and/or Direct	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numl			4 C	ity / State / Zip	
Р В	IRCH, ELIZABETH	2101 CONNECTICUT AVE NW			WASHINGTON DC		
v Z	NGALE, DANIEL COM	231 C STREET NW. SUITE B			WASHINGTON DC 2000		
s N	ELSON, CATHY	225 19TH ST NE	:		WASHINGTON DC		
T PI	ETRANTOE, ALEXA	156 DUDDENGTO	ON PLSE	SUTTE ECC	WASHINGTON DC 2000G		
D A	AWEN BAR	600 VY BROADW	AY, STE 100 STREET MIN	SACTE SE WASHINGTON DC 20000			
D BE	EAN, TERRY	1882 SW HAWTH	ORNE TERRACE	PORTLAND OR			
	8. Name and Address of C	ırrent Registered Age	ent	Name	9. Name and A	Address of New Regist	
." 1311 EXE	PORATION SYSTEM CUTIVE CENTER DRIVE		Street Address (P.O. Box Number is Not receptable)				
TALLAHAS	SSEE FL 32301	İ	Suite, Apt. #, Etc. 70002719567 5 City -12/22/93san01063ce-020 ****236. FL ****236.25				
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 Date							
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No							
12. 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 filling 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 cath.							
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE CORDINATED TO DESCRIPTION OF DIRECTOR OR DIRECTOR D							

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