

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 NOV 17 PM 5:34

DOCUMENT # F99000001619

1. Corporation Name

ST. JOHN'S FORUM, INC.

REINSTATEMENT 04205

500061519505
11/17/05--01044--024 **908.75

2. Principal Office Address 425 DOCKSIDE DRIVE Suite, Apt. #, etc. UNIT #905 PIYC III City & State NAPLES, FLORIDA Zip 34108		Country USA		3. Mailing Office Address 425 DOCKSIDE DRIVE Suite, Apt. #, etc. UNIT #905 PIYC III City & State NAPLES, FLORIDA Zip 34108		Country USA	
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CR2E081 (8/05)

4. Date Incorporated or Qualified To Do Business in Florida	03/26/1999
5. FEI Number 371234919	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>	\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name CHARLES T. RUPPMAN			
Street Address (P.O. Box Number is Not Acceptable) 425 DOCKSIDE DRIVE			
Suite, Apt. #, Etc. UNIT #905 PIYC III			
City NAPLES		State FL	Zip Code 34108

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: Charles T. Ruppman Date: 11/16/05

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
DP	LENA M. RUPPMAN	512 HIDDEN LANE	PEORIA, IL 61614
ST	CHARLES T. RUPPMAN	512 HIDDEN LANE	PEORIA, IL 61614

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: Charles T. Ruppman Date: 11/16/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #