

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT  
 FLORIDA DEPARTMENT OF STATE  
**Jim Smith**  
 Secretary of State  
 DIVISION OF CORPORATIONS



FILED

02 NOV 13 PM 5:41

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # N00000006527

1. Corporation Name  
**R.E.A.C.H. KIDS INC.**



600008966176  
 11/13/02--01046--005 \*\*61.25

Principal Place of Business  
 2190 CHRISTINE DR  
 TITUSVILLE FL 32796

Mailing Address  
 2190 CHRISTINE DR  
 TITUSVILLE FL 32796

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida <b>10/02/2000</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number <b>59-3664407</b>	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
DST	COPELAND, CLARA	4302 SEYBOLD AVE	ORLANDO FL 32808
D	DAYHOFF, COLLEN	2190 CHRISTINE DR	TITUSVILLE FL 32796
DPV	BLOSSEY, ERIC H	4302 SEYBOLD AVE	ORLANDO FL 32808

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
DAYHOFF, COLLEEN S 2190 CHRISTINE DR TITUSVILLE FL 32796		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, Etc.	
		City	State <b>FL</b>

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. or 617.0505, F.S.

Signature of Registered Agent: *Colleen S. Dayhoff* REGISTERED AGENT MUST SIGN  
 Date: 10-20-02

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 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: *Colleen S. Dayhoff* REGISTERED AGENT MUST SIGN  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **Colleen S. Dayhoff**  
 Date: 10-20-02  
 Daytime Phone #: 321-385-3858

CR2E040 (8/02)

Dear Sus;

Oct. 30, 02  
N000000004527

Please be aware I have not gotten a notice from your office that you have not received the annual report.

I have given everything to our book keeper's Jackson Bennett and they as I would have sent it. I am calling your office and will drop by the papers as you may send them I am sorry, as had I received notice from your office I would have picked it out and sent it along with the check as I did last year.

Colleen S. Rayhoff  
Executive Director  
Rock Dads Inc.