PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.





FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N0000007865

1. Corporation Name

RESOURCE PRESERVATION ALLIANCE, INC.

Principal Place of Business

Mailing Address

2709 SWAMP CABBAGE CT STE 107
FT MYERS FL 33901

2709 SWAMP CABBAGE CT STE 107

FT-MYERS FL 33901

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



If above addresses are incorrect in any way, line through incorrect information and enter correction b 2. New Principal Office Address, If Applicable 53 10 Marina Dr. Suite, Apt. #, etc. Suite, Apt. #, etc.				Date Incorporated or Qualified To Do Business in Florida 11/27/2000			
-	7,500			5. FEI Number	nber ,		Applied For
		ee lia 65-/12		65-112:	5886 Not Applica		Not Applicable
330	122 Lee 339	'ee	CERTIFICATE OF STATUS DESIRED S8.75 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)							
Title(s)	Name of Officers and/or Directors		eet Address of Each icer and/or Director		City / State / Zip		
D	ATRICK, JOHN P O BOX 792			ST JAMES CITY FL 3395		3956	
D	DOOLEY, RHONDA	VE	BOKEELIIA FL 33922				
D	REPPA, DENISE	DR .	ST JAMES CITY FL 33956				
į				00	000469 -11/29/01- *****70.0	795 -01034 0 ***	06 -024 **70.00
	·				01 UBn	18	, .
8. Name and Address of Current Registered Agent Name				9. Name and Address of New Registered Agent			
DONOHUE, KENNETH 2709 SWAMP CABBAGE CT STE 107 FT MYERS FL 33901			Street Address (P.O. Box Number is Not Acceptable) 5370 Marina Dr. Suite, Apt. #, Etc.				
			Bokeelia FL 33922				3922
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 Planda Doo Levy - Date 10-26-01							
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							

11-283

941-28

₹**:** _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING ORDICER OR DIRECTOR

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Date

Daytime Phone #

pagerofz

STATE OF FLORIDA COUNTY OF LEE

to the second to

The undersigned affiants, Rhonda Dooley, Director of Resource Preservation Alliance, Inc. operating in Lee County, Florida being duly sworn, deposes and states the following:

Resource Preservation Alliance, Inc. was incorporated on November 27, 2000 as a non-profit corporation.

As of October 27, 2001, the only documentation received from the State in reference this corporation was the certified return of the Articles of Incorporation. Our registered agent has not received any documentation or information relating to the annual report/uniform business reports.

On or about October 15, 2001 we received, by and through our registered agent, an application for reinstatement and a letter indicating we had been administratively dissolved for failure to file an annual report/uniform business report.

We are hereby notifying the State of Florida Division of Corporations that Resource Preservation Alliance, Inc. did NOT receive any form or notice of filing annual reports/uniform business reports.

Rhonda Dooley, Director

Resource Preservation Alliance, Inc.

SUBSCRIBED AND SWORN to by Rhonda Dooley, Director Resource Preservation Alliance, Inc., under penalties of perjury, before me on this 26 day of 2001.

who is personally known to me

who has produced identification

Signature of Notary V

Kennetha Lynn Donohue
My Commission CC987907

Name of Notary stamped, printed or typed