FILED
09 APR 17 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N01000004985

1. Corporate Name

PJ CALLAHAN FOUNDATION, INC.

REINSTATEMENT 07-09

CR2E081 (12/08)

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
500 S. Australian Ave., #110	500 S. Australian Ave., #110
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: West Palm Beach, FL	City & State: West Palm Beach, FL
Zip: 33401 County: USA	Zip: 33401 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 07/12/2001

5. FEI Number: 010687604 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $5.00 Additional Fee Required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: David Pratt

Street Address (P.O. Box Number is Not Acceptable): 2255 Glades Rd.,

Suite, Apt. #, Etc.: Ste. 340W

City: Boca Raton State: FL Zip Code: 33431

☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0505, F.S.

Signature of Registered Agent: David Pratt REGISTERED AGENT MUST SIGN Date: 4/10/09

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City/State/Zip
D	Carolyn Callahan	500 S. Australian Ave., #110	West Palm Beach, FL 33401
D	Christine Callahan Rasnake	500 S. Australian Ave., #110	West Palm Beach, FL 33401
D	Patricia Burt	500 S. Australian Ave., #110	West Palm Beach, FL 33401

10. I certify that I am an officer or director of the corporation 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 contained in Chapter 119, F.S. The information provided on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Linda Farley Linda Farley Sec. / Treas 4/9/09 561-366-9991

SIGNATURE AND TYPED OR PRINTED NAME OF PERSON OR OFFICER OR DIRECTOR — Date — Daytime Phone #

Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

PJ CALLAHAN FOUNDATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	~~$358.75~~

$183.75
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