APPROVED AND FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

07 DEC 20 AM 10:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01000008292

1. Corporation Name
The Uncle Fred Foundation, Inc.

LL 12-25-07

200113305682
12/20/07--01035--010 **367.50

REINSTATEMENT 02-07

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
1111 N. Westshore Blvd.	1111 N. Westshore Blvd.
Suite, Apt. #, etc: Suite 604	Suite, Apt. #, etc: Suite 604
City & State: Tampa, FL	City & State: Tampa, FL
Zip: 33607 Country: USA	Zip: 33607 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 11/21/2001

5. FEI Number: 26-1500548 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Andres S. Prida

Street Address (P.O. Box Number is Not Acceptable): 1106 N. Franklin Street

Suite, Apt. #, Etc.:

City: Tampa State: FL Zip Code: 33602

XX 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 617.0503, F.S.

Signature of Registered Agent: _____ Date: 12-5-07

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
D	KIM EICHELBAUM	1111 N. Westshore Blvd., Ste. 604	Tampa, FL 33607
D	PETER DAVIS	1111 N. Westshore Blvd., Ste. 604	Tampa, FL 33607
D	PATRICIA SLESINGER	1111 N. Westshore Blvd., Ste. 604	Tampa, FL 33607
	PETER A. CORNELL	1111 N WESTSHORE BL., 604	TAMPA, FL, 33607
	DAVID G.L. BENTSON	1111 N. WESTSHORE BL, ST. 604	TAMPA, FL, 33607
	ANDRES S. PRIDA	1111 N. WESTSHORE BL ST 604	TAMPA, FL, 33607

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 contained in Chapter 119, 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: _____ PATRICIA A. SLESINGER 12/5/07

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