## PLEASE-READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

OG DEC 26 M 3 22
SEGRETARY OF STATE
FALLAHASSEE, FLORIDA

DOCUMENT # 1	N02000001	999
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1. Corporation Name

Camperdown High School Past Students Association, FL Chapter, Inc.

2. Principal Office Address 2712 Casablanca Drive		P.O. Box 245086		REINSTATEMENT			
Suite, Apt. #, etc.		Suite, Apt. #, etc.				<del></del>	
				4. Date Incorporated or Qualified 71 2/2002 To Do Business in Florida 03/12/2002			
Miramar, FL		Pembroke Pines, FL			<del></del>	Applied For	
				<sup>5.</sup> ნეზნ40797	⊢	Not Applicable	
<sup>ℤ</sup> 3302	3	ŰŠA	33024	ŰŜÃ	6. CERTIFICATE OF STATUS DESIRED \$8.75		tional Fee required
-			7. Name and	Address of Current Regist	ered Agent		
	Mich	nelle Cooper					

Michelle Cooper	
2712 Casablanca Drive	
Suite, Apt. #, Etc.	12/27/0601031001 **12
Miramar	State 33023

Signature d	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  REGISTERED AGENT MOST SIGN  Date							
9. Name:	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					
P/D	Michelle Cooper	2712 Casablanca Drive	Miramar, FL 33023					
VP/D	Allan Cunningham	12050 NW 18th Street	Plantation, FL 33323					
S	Dawn Williams	17376 SW 20th Street	Miramar, FL 33029					
T/D	Faith Simpson	3453 SE Jake Court, #142	Stuart, FL 34994					
AT	Sharon Dormer	5901 NW 16th Street	Sunrise, FL 33313					

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 filling 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:

McChelle Cooper
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/18/06

(954) 802-6590

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Daytime Phone #



## CAMPERDOWN HIGH SCHOOL PAST STUDENTS ASSOCIATION, FL CHAPTER, INC.

P.O. Box 245086 Pembroke Pines, FL 33024

December 18, 2006

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Reinstatement of Non-Profit Corporation

Camperdown High School Past Students Association, FL Inc.

Document Number: N02000001999

FEI Number: 010640797

## Dear Sir/Madam:

It has just been brought to our attention that the aforementioned corporation was administratively dissolved for non-filing of Annual Report in 2005. We would like the status to be reactivated and for the reinstatement fee to be waived. The then President and Registered Agent of the organization did not turn over the annual report notices, if he received them and the current officers were not aware that the relevant documents were not filed.

Please find attached a Corporation Reinstatement with the new officers duly noted and our check in the amount of \$122.50. As soon as our status is reactivated we will immediately file the Annual Reports for 2005 and 2006 online.

Thanking you in advance for your cooperation in this matter.

Sincerely,

Michelle Cooper

President