

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING

APPROVED
AND
FILED

05 MAR 14 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State

DIVISION OF CORPORATIONS

W 05000004098

DOCUMENT # N02000004490

1. Corporation Name

N02000004490

PALM BEACH COUNTY ALLIANCE OF CHARTER SCHOOLS, INC.

REINSTATEMENT 03-05

MRS

2. Principal Office Address

1310 OLD CONGRESS AVENUE

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

WEST PALM BEACH, FL

City & State

Zip

33407

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

6/2002

5. FEI Number

☒ 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

RICHARD-ALLERDYCE, DIANE

Street Address (P.O. Box Number is Not Acceptable)

95 NE FIRST AVENUE

Suite, Apt. #, Etc.

City

DELRAY BEACH

State

FL

Zip Code

33444

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

Diane Richard Allerdyc

Date JANUARY 20, 2005

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	GREEN, JOE	1004 GREEN PINE BLVD., #D1	WEST PALM BEACH, FL 33409
D	RICHARD-ALLERDYCE, DIANE	95 NE FIRST AVENUE	DELRAY BEACH, FL 33444
D	FLAMMER, MARC	1310 OLD CONGRESS AVENUE	WEST PALM BEACH, FL 33407
D	TURCHIARO, MARIE	7719 S. DIXIE HWY	WEST PALM BEACH, FL 33405

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Diane R Allerdyc

Date

1/20/05 (526) 4145464

Daytime Phone #

CR2E081 (01/05)