## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		DEPARTN Secretary of dision of con			06 M	FILED R31 PM12:	01	
DOCUMENT # N04000008074  1. Corporation Name				ALLAHASSEE, FLORIDA				
Citizens Speaking Out, Inc.								
		Office Address W. Ne			CR2E081 (12/05)	85-06		
Suite, Apt. #, etc. Suite, A 343		, etc.	08-15-05 90078 005 \$61.25  4. Date Incorporated or Qualified To Do Business in Florida 08/17/2004					
City & State Newberry, FI		Newberry, FI			Applied For Not Applicable		Applied For	
32669 COUNTY USA	69 ÜSA 32669		ÛŚÄ	6. CERTIFICATE	CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee requirements of States of			
Brannen, J. Breck  215 S. Monroe Street  Second Floor  Talahassee  State FL 32301								
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  Registered Agent								
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)								
Officers and/or Direct	Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip		
Chairman Stafford Jones	14260 V	14260 W. Newberry Rd, Suite 343			Newberry, FI 32669			
					00070453049 <del>1/86 81856 882 **61.25</del>			
			11					
			4.					
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 read 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 accuse, and may signature shall have the same legal effect as if made under oath.  SIGNATURE:								
SIGNATURE: SIGNATURE AND TYPED O	R PRINTED NAME OF	SIGNING OFFIC	ER OR DIRECTOR	<u> </u>	Date	Daytime	Phone #	

To: Division of Corporations

From: Stafford Jones Date: 01-13-06

pate: 01-13-06

03-21-06 Amendment

Re: Dissolution / Reinstatement of Citizens Speaking Out, Inc.

Today, January 13<sup>th</sup>, I spoke with somebody in the Division of Corporations about the dissolution of Citizens Speaking Out, Inc.

The Annual Report for 2005 was rejected due to missing information on the form. A letter from the Division of Corporations dated September 13<sup>th</sup>, 2005 indicating that you had received the report along with the check for \$61.25 and requesting the missing information was not received by us. Consequently, Citizens Speaking Out, Inc. was dissolved.

In speaking with the Division of Corporations today, I was given the following instructions to reinstate.

- 1. Download and fill out corporate reinstatement form
- 2. Obtain signature of registered agent
- 3. Include this note explaining not receiving form requesting additional info
- 4. Include check for \$61.75 to cover 2006 report fee

These things are done and included as necessary.

## 03-21-06 Amendment:

The Div. of Corporations sent it back, yet again, because we sent in a copy of the reinstatement form instead of one with original signatures. Included is a reinstatement document with original signatures.

If you have any questions, please don't hesitate to call me at 352-256-9579.

Thank you.