

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 APR 22 AM 11:18

DOCUMENT # N05000011696

1. Corporation Name

Community Education Alliance, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900121197169

05/07/08--01046--002 **183.75

900121197169

03/25/08--01017--020 **8.75

2. Principal Office Address - No P.O. Box #

7100 W. Oakland Pk Blvd

3. Mailing Office Address

7100 W. Oakland Pk. Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SUNRISE, FL

City & State

SUNRISE, FL

Zip

33313

Country

USA

Zip

33313

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

11/16/2005

5. FEI Number

20-4110096

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$3.75 Additional Fee required for a Certificate of Status

REINSTATEMENT 06-08 ^{KS}

7. Name and Address of Current Registered Agent

Name G. OLIVER BARNES

Street Address (P.O. Box Number is Not Acceptable)
11420 NW 28th COURT

Suite, Apt. #, Etc.

City PLANTATION ACRES

State FL

Zip Code 33323

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 [Signature]

REGISTERED AGENT MUST SIGN

Date 3/19/08

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.	G. OLIVER BARNES	11420 NW 28th Court	Plantation, FL 33323
T.	JOAN WALKER	10420 NW 31 Court	SUNRISE, FL 33351
VP	ENID MCKOY	4410 N.W. 25th ST.	LAUDERHILL, FL 33313
S	SONIA E. BARNES	11420 N.W. 28th Court	Plantation, FL 33323
VP	DONALD KING	P.O. Box 5504	FL-Lauderdale, FL 33310

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/08 954-297-7601

Date Daytime Phone #