	_	TIONS BEFORE COMPLE	TING THIS FORM.
APPLICATION FOR REINSTATEMENT	Sandi Secr	PARTMENT OF STATE BE B. Mortham Stary of State OF CORPORATIONS	SECRETARY OF STATE DIVISION OF CORPORATIONS
DOCUMENT # N301		OF CORPORATIONS	97 OCT 31 PM 4: 09
Corporation Name IANATEE COMMUNITY COU	NCIL FOR CH	ILDREN, INC.	tt 10b1
rincipat Place of Business OA 77TH ST. WEST	Malling Address 204 77TH ST. WEST		
RADENTON FL 34209 S	BRADENTON FL 3420 US		I DER 11111 ODITER ALEDI BANDI DARI BIDAK BADAK DIDAK DIDAK DIDAK DIDAK DADAK
If above addresses are incorrect in any way, line the New Principal Office Address, if Applicable (Mr. Apr., Luke)	3. New Mailing Office	Address, If Applicable 7. Date thoo To Do Bu	rporated or Qualified siness in Florida 01/12/1989
bk 218 iy & State Bradenton, FL p Country	City & State Braden	Country 6.	56-3120204 Not Applicable
34205 U.S.A Names and Street Addresses of Each Officer and	342.05	USA CERTIFICA	ATE OF STATUS DESIRED for a Certificate of Status
Fitte(s) Name of Officers and/or Directors 2	3	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
MELTON, ANNE Barbra	Veh/5 2047	7TH ST. WEST 1101-6 & Ave West Scite 21	BRADENTON FL 34209- 34205
D WHITE, BARBARA Mary 611	en Stahr 1101-	BTH AVE.WEST, SUITE 218 57 Conky Rd, W., Sk. 130	RPADENTON EL 2400E. 2/60/
D CAMP, BETTY Jane Par		AVISTA DRIVE 00 Monatu Ane. W.	SARASOTA FL. 84243 Bradenton, FL 34209
BD ABKERMAN, LYNDA Ly'nda Bryan-Beach		97H AVE: WEST, SUITE 218 490 Harler Rd.	BRADENTON FL 34205 Francisco, F. C. 34221
		8	000023381280 -11/04/97-01087-027 ****236.25 ****236.25
8. Name and Address of Current	Registered Agent	9. Name and	d Address of New Registered Agent
PACE, PAULETTE R. 1111 3RD AVENUE WEST BRADENTON FL 34205		Suite, Apt. #, Etc.	State Zip Code
gnature of agistered Agent	ve named corporation, a		on FL 39205 ction 607.0505, F.S. Date Ocycle 28, 1997

12. 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 setisfies 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.

1

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-28:97 941-746-1904 Date Daylino Phono #