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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 05 APR 29 PM 4:48 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # N37257					
1. Corporation Name <div style="font-size: 1.2em; font-family: cursive;">Keep Florida Beautiful, Inc</div>					
2. Principal Office Address <div style="font-size: 1.2em; font-family: cursive;">1126 Brandt Drive</div> Suite, Apt. #, etc.		3. Mailing Office Address <div style="font-size: 1.2em; font-family: cursive;">1126 Brandt Drive</div> Suite, Apt. #, etc.		<div style="font-size: 1.5em; font-family: cursive;">2004-2005 Reinst</div>	
City & State <div style="font-size: 1.2em; font-family: cursive;">Tallahassee FL</div>		City & State <div style="font-size: 1.2em; font-family: cursive;">Tallahassee FL</div>			
Zip <div style="font-size: 1.2em; font-family: cursive;">32308</div>	Country <div style="font-size: 1.2em; font-family: cursive;">US</div>	Zip <div style="font-size: 1.2em; font-family: cursive;">32308</div>	Country <div style="font-size: 1.2em; font-family: cursive;">US</div>		
4. Date Incorporated or Qualified To Do Business in Florida <div style="font-size: 1.2em; font-family: cursive;">05/01/95</div>				5. FEI Number <div style="font-size: 1.2em; font-family: cursive;">573022345</div>	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name <div style="font-size: 1.2em; font-family: cursive;">Donald L. Bell</div>					
Street Address (P.O. Box Number is Not Acceptable) <div style="font-size: 1.2em; font-family: cursive;">1016 Shalimar Drive</div>					
Suite, Apt. #, Etc.					
City <div style="font-size: 1.2em; font-family: cursive;">Tallahassee</div>				State <div style="font-size: 1.2em; font-family: cursive;">FL</div>	Zip Code <div style="font-size: 1.2em; font-family: cursive;">32312</div>
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 <div style="font-size: 1.2em; font-family: cursive;">Donald L. Bell</div> Date <div style="font-size: 1.2em; font-family: cursive;">4-28-05</div>					
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	John Paul Bailey	103 South Adams Street	Tallahassee FL, 32301		
D	David W. Johnson, L.A.	1491 Second Street	Sarasota, FL 34236		
D	Jo Williams	824 Spinnaker Dr. E	Hollywood, FL 33019		
D	Gary L. Henry, L.A.	1126 Brandt Drive	Tallahassee, FL 32308		
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)(l), 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: <div style="font-size: 1.2em; font-family: cursive;">Gary L. Henry</div> Date <div style="font-size: 1.2em; font-family: cursive;">4/28/05</div> (850) 877-7101					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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