PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

# APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
**Katherine Harris**
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 OCT 16 PM 6:56

DOCUMENT # N45977

1. Corporation Name

LEADERSHIP BROWARD FOUNDATION, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 1415 E SUNRISE BLVD<br>SUITE 401<br>FT. LAUDERDALE FL 33304<br>US | 1415 E. SUNRISE BLVD<br>SUITE 401<br>FT. LAUDERDALE FL 33304<br>US |

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 00

| 2. New Principal Office Address, If Applicable | 3. New Mailing Office Address, If Applicable |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

4. Date Incorporated or Qualified To Do Business in Florida: 11/14/1991

5. FEI Number: 65-0387636 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

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-10/26/00--01037--009
****236.25 ****236.25

| 1 Title(s) | 2 Name of Officers and/or Directors | 3 Street Address of Each Officer and/or Director | 4 |
|---|---|---|---|
| ~~P~~D | ~~WALSH, DIANE~~ DRAKE, JENNIFER | ~~3111 UNIVERSITY DRIVE, PENTHOUSE~~ 3111 Stirling Rd. | ~~CORAL SPRINGS FL 33065~~ Ft. Laud, FL. 33312 |
| D | ~~GREENBAUM, JOEL~~ Hotte, Anne | 1415 E SUNRISE BLVD, STE 401 | FT LAUDERDALE FL 33304 |
| ~~P~~T | ~~FEUERBERG, PAUL~~ PERRELLA, TED | ~~1000 CORPORATE BLVD, EAST BLDG,~~ 1000 W. McNab Rd. | BOCA RATON FL 33431 Pompano Bch, FL. 33069 |
| PE/D | Korab, Phyllis | 115 S. Andrews Ave Rm. A680 | Ft. Laud. FL, 33301 |
| M/D | Martin, Nicole | 1415 E Sunrise Blvd, STE 401 | Ft. Laud, FL 33304 |
| | | | |

8. Name and Address of Current Registered Agent

GALLOWAY, AMY J
~~1700 EAST LAS OLAS BLVD, PENTHOUSE 1~~
~~FT. LAUDERDALE FL 33301~~

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable): 1415 E. SUNRISE BLVD., STE 401
Suite, Apt. #, Etc.
City: FT LAUDERDALE, State: FL, Zip Code: 33304

CR2E040 (8/00)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Amy Galloway Date: 10-13-00
REGISTERED AGENT MUST SIGN

11. 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.

1 AD

SIGNATURE: Nicole Martin 10-13-00 (954-767-8860)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #