

FILED H.05000117193 3

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

05 MAY -9 PM 4:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N50138			
1. Corporation Name Gay and Lesbian Lawyers Association (GALLA) of South Florida, Inc.			
2. Principal Office Address 927 Lincoln Rd.		3. Mailing Office Address 927 Lincoln Rd.	
Suite, Apt. #, etc. 118		Suite, Apt. #, etc. 118	
City & State Miami Beach, FL		City & State Miami Beach, FL	
Zip 33139	Country USA	Zip 33139	Country USA
4. Date incorporated or Qualified To Do Business in Florida 7/30/1992		5. FEI Number 850382808	
		Applied For Not Applicable	
		6. CERTIFICATE OF STATUS DESIRED ☒	
7. Name and Address of Current Registered Agent			
Name Steven Robert Kozlowski			
Street Address (P.O. Box Number is Not Acceptable) 927 Lincoln Rd.			
Suite, Apt. #, Etc. 118			
City Miami Beach		State FL	Zip Code 33139
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0506 or 617.0503, F.S.			
Signature of Registered Agent		Date 4/27/05	
REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Steven Robert Kozlowski	927 Lincoln Rd., #118	Miami Beach, FL 33139
VD	Elizabeth Schwartz	927 Lincoln Rd., #118	Miami Beach, FL 33139
TD	Julia Dawson	1137 NE 123rd Street	N. Miami, FL 33161
SD	William E. Adams	One Los Olas Circle, #607	FL Lauderdale, FL
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)(b), 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: 		Date	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER, DIRECTOR		Daytime Phone #	

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**Florida Department of State
Division of Corporations
Public Access System**

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Account Number : I20000000195
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CORPORATION REINSTATEMENT

GAY AND LESBIAN LAWYERS ASSOCIATION (GALLA) OF SOUTH

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