

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 JUL 26 AM 9:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N9400003367

1. Corporation Name

The Greater Miami South Chapter of
the National Society of Fund Raising
Executives, Inc.

000006824430--0
-08/01/02--01003--005
****542.50 ****542.50

REINSTATEMENT 97-02

2. Principal Office Address c/o Ilene Zweig
11742 SW 92nd Terrace

3. Mailing Office Address c/o Ilene Zweig
11742 SW 92nd Terrace

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami, FL

City & State
Miami, FL

Zip Country
33186 USA

Zip Country
33186 USA

4. Date Incorporated or Qualified
To Do Business in Florida July 5, 1994

5. FEI Number Applied For
650121702 Not Applicable

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

7. Name and Address of Current Registered Agent

Name Tina Surman
Street Address (P.O. Box Number is Not Acceptable)
1300 Memorial Drive
Suite, Apt. #, Etc. University of Miami, Richter Library
City Coral Gables State FL Zip Code 33124-0320

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 Tina Surman Date 4/2/02
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
P/D	Deane Hundley	Fairchild Tropical Garden 10901 Old Cutler Rd.	Miami/FL/ 33156
VP/D	Jeffrie Herrmann	Boy Scouts of America 15255 NW 82nd Ave	Miami Lakes/FL/ 33016
T/D	Gene Gutierrez	Gutierrez Group 1596 NE 1st Ave.	Miami/FL/ 33132
SD	Lisa Yalkut	Audubon of Florida 444 Brickell Avenue	Miami/FL/ 33131
VP/D	Tina Surman	University of Miami Richter Library	Coral Gables/FL/ 33124-0320

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)(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.

SIGNATURE: Tina Surman Tina Surman 4/2/02 305-284-4026
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (8/00)

2/20/02