

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT #N94000003884

**1. Corporation Name**

CENTRAL FLORIDA ASSOCIATION FOR  
WOMEN LAWYERS, INC.

**2. Principal Office Address**

60 W. Robinson Street

Suite, Apt. #, etc.

City & State

Orlando, Florida

Zip

32801

Country

USA

**3. Mailing Office Address**

60 W. Robinson Street

Suite, Apt. #, etc.

City & State

Orlando, Florida

Zip

32801

Country

USA

**4. Date Incorporated or Qualified  
To Do Business in Florida**

8/8/1994

**5. FEI Number**

593266285

Applied For

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

Mary Musette Stewart

Street Address (P.O. Box Number is Not Acceptable)

60 W. Robinson Street

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32801

**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

*Mary Musette Stewart*  
REGISTERED AGENT MUST SIGN

Date

1/30/06

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

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip |
|--------|--------------------------------------|---|--------------------|
| D      | Mary Musette Stewart                 | 60 W. Robinson Street                             | Orlando, FL 32801  |
| D      | Kimberly D. Webb                     | 300 S Orange Avenue<br>Suite 1400                 | Orlando, FL 32801  |
| D      | Whitney E. Evers                     | 1000 Legion Place<br>Suite 1700                   | Orlando, FL 32801  |
| D      | Valencia Percy-Flakes                | 322 N Magnolia Avenue                             | Orlando, FL 32801  |
|        |                                      |   |                    |
|        |                                      |   |                    |

**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 contained in Chapter 119, 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:

*Mary Musette Stewart*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/30/06 · 407/422-6105

Daytime Phone #