

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 24 AM 11:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000000213

1. Corporation Name

INTERIOR DESIGN ASSOCIATIONS FOUNDATION, INC.

2. Principal Office Address
c/o Designworks Creative
Partnership

Suite, Apt. #, etc.

250 Royal Court

City & State

Delray Beach, FL

Zip

33444

Country

3. Mailing Office Address
c/o Designworks Creative
Partnership

Suite, Apt. #, etc.

250 Royal Court

City & State

Delray Beach, FL

Zip

33444

Country

REINSTATEMENT 03

**4. Date Incorporated or Qualified
To Do Business in Florida** 1/13/1995

5. FEI Number
65-0561445

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

Steven M. Hefner

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

c/o Designworks Creative Partnership

Suite, Apt. #, Etc.

250 Royal Court

City

Delray Beach

State

FL

Zip Code

33444

MRS

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

Steven M. Hefner

REGISTERED AGENT MUST SIGN

Date

10/17/03

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	Susette Wilder Crosby	4480 Bayshore Circle	Tallahassee, FL 32309
P Elect	Steven M. Hefner	250 Royal Court	Delray Beach, FL 33444
T	Ann Wingate	334 East Duval Street	Jacksonville, FL 32202
D	Michael Wirtz	345 W. Palmetto Park Road	Boca Raton, FL 33432
D	Shelley Siegel	9268 Palomino Drive	Lake Worth, FL 33467
D	Lauraine Dunn-Glispin	68 NE 91st Street	Miami Shores, FL 33138

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steven M. Hefner

Date

10/17/03 (561) 272-6855

Daytime Phone #

CR2E081 (10/02)