PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 MAR -6 PM 12:46

DOCUMENT # N95000000506

1. Corporation Name

Broward County Foster Parent Association Inc.

200145147702
03/06/09--01027--024 **612.50

REINSTATEMENT (FEB 2008) 00-09 KS

2. Principal Office Address - No P.O. Box #		**3.** Mailing Office Address	
313 N. State Rd. 7		313 N. State Rd. 7	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
c/o Jennifer Smith		c/o Jennifer Smith	
City & State		City & State	
Plantaion Florida		Plantaion Florida	
Zip	Country	Zip	Country
33317	United States	33317	United States

4. Date Incorporated or Qualified To Do Business in Florida 2/1/95

5. FEI Number 650557428 ☐ 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
Diana Lake

Street Address (P.O. Box Number is Not Acceptable)
14141 Appalachian Trail

Suite, Apt. #, Etc.

City	State	Zip Code
Davie	FL	33325

☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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 Diana Lake Date 3/3/09
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
PRES	Anne Davis	7490 NW 12th Street	Plantation FL 33313
1st Vice	Michelle Berry	5318 NW 49th Ct	Coconut Creek FL 33073
2nd Vice	Sue Redfern	5240 SW 8th Street	Plantation FL 33317
Record Secretary	Diana Lake	14141 Appalachian Trl	Davie FL 33325
Treasurer	Mary Van Den Heuvel	1540 N. Andrews Ave	Fort Laud FL 33311
Director	Jennifer Smith	19371 SW 61st Street	Pembroke Pines FL 33332

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: Diana Lake 3/3/09
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #