

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N95000005380

1. Corporation Name

WANSIKI FOUNDATION, INC.

Principal Place of Business

3213 N OCEAN BLVD
SUITE #6
FT LAUDERDALE FL 33308

Mailing Address

PO BOX 4549
FORT LAUDERDALE FL 33308
US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

~~Suite, Apt. #, etc.~~
~~1815 E. COMMERCIAL BLVD~~

~~City & State~~
~~FT LAUDERDALE FL~~

~~Zip~~
~~33308~~

~~Country~~
~~USA~~

3. New Mailing Office Address, If Applicable

~~Suite, Apt. #, etc.~~
~~1815 E. COMMERCIAL BLVD~~

~~City & State~~
~~FT LAUDERDALE FL~~

~~Zip~~
~~33308~~

~~Country~~
~~USA~~

4. Date Incorporated or Qualified
To Do Business In Florida

11/13/1995

SP

5. FEI Number

65-0660053

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

☒ \$8.75 Additional Fee required
for a Certificate of Status

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

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
1	2	3	4
CPD	WANSIKI, MARIE J	3213 N OCEAN BLVD SUITE 6 1815 E COMMERCIAL BLVD #305	FT LAUDERDALE FL 33308
TRS	HARRELL, JEFFERY	3213 N OCEAN BLVD 1815 E COMMERCIAL BLVD	FORT LAUDERDALE FL 33308
VD	SILVER, JAY	3213 N OCEAN BLVD 1815 E COMMERCIAL BLVD #305	FORT LAUDERDALE FL 33308
D	KOOSER, ROGER	3213 N OCEAN BLVD 1815 E COMMERCIAL BLVD #305	FORT LAUDERDALE FL 33308
D, S.	TIANO, ALAN	3213 N OCEAN 1815 E COMMERCIAL BLVD #305	FORT LAUDERDALE FL 33308
D	SMITH, PATRICK S.	1815 E COMMERCIAL BLVD	Fort Lauderdale, FL 33308
D	KAUFFMAN, JOYCE	1815 E Commercial Blvd	ft Lauderdale FL 33308

8. Name and Address of Current Registered Agent

WANSKI, MARIE J
3213 N OCEAN BLVD
SUITE #6
FORT LAUDERDALE FL 33304

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc. 900004679499-7
City State Zip Code
***245.PL ***245.00

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Marie J. Wanski
REGISTERED AGENT MUST SIGN

Date

10/16/2001

11. 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:

Marie J. Wanski
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/16/2001

CR2E040 (8/01)