PLEASE READ	ALL INSTRUCTION	S BEFORE (COMPLETING THIS FORM.
APPLICATION	FLORIDA DEPARTME	T	
FOR	Sandra B.		AND AND
REINSTATEMENT Secretary of State			t المعادية ا المعادية المعادية الم
DOCUMENT: # N9500005386			98 NOV 20 PN 3: 45
'Standing Proud Conductive Learning			SECRETARY OF STATE
· Center, Inc. 11/08/00076776			TALLARASSEE, FLORIDA
Principal Place of Business Mailing Address			-
11765 Mandarin Rd 11765 Mandarin Rd			
Jacksonville FL Jacksonville FL			EINSTATEMENT9/0-96
3223-1334 If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable			4. Date Incorporated or Qualified To Do Business In Florida
Suite, Apt. #, etc.	e, Apt. #, etc.		Agvember 13, 1995
City & State	City & State		59-3341992 Applied For Not Applicable
Zip Country	Zip Coun	itry	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Names and Street Addresses of Each Officer and	d/or Director (Florida poporofit corpo	rations must list at lea	
Title(s) Name of Officers and/or Directors	s	Street Address of Each	
1 2 3 (Do NOT Use Post Office Box Numbers) 4 11765 Mandarin Road D			
P/D Debra Walthour-Easton Jacksonville FL 3223 Dacksonville FL 3223			
VP/D Scott Erwin Easton 11765 Mandarin Road Jacksonville FL 32223			
Sect. Debra Walthour - Easton 11765 Mandarin Road Jacksonville FL 3223			
Trea. Scott Erwin Easton 11765 Mandarin Road Jacksonville FL 32223			
Dir Dr James H. Easton 5106 Griffin		riffin.St_	D Moss Point MS 39563
Dir Faye Dagin	4805 F	hil Rose	Jackonville FL 32256
8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name			
Debra Walthour - Easton			20. Box NUCCINICIPIZE 68 1 1 60 4
Jacksonville FL 32223-1334 Suite, Apr. #, Etc.			
Jacksonville FC 3 add 3-13.37 Sume, pt. m. to. *****87.50 *****87.50 City State Zip Code			
10. 1, 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 ALLA ALLACIA BAR Date 02/01111/1998			
14. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No V (See other side for information on intangible tax.)			
12. 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 5,4775, Further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section boccord sizes 7,005,4775, Further certify that when filing owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section boccord, sizes 7,007,007,007,007,007,007,007,007,007,0			
SIGNATURE: AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

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