

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

99 DEC 27 AM 10:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N97000001584

1. Corporation Name

PEOPLE UPLIFTING PEOPLE, INC.

Principal Place of Business

2519-A ROYAL PINES CIR  
CLEARWATER FL 34623

Mailing Address

2519-A ROYAL PINES CIR  
CLEARWATER FL 34623

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

03/21/1997

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

59-3434-689

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☒

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DP	LEACH, EARL F	2519-A ROYAL PINES CIR	CLEARWATER FL 34623 33763
DST	LEACH, RUTH M	2519-A ROYAL PINES CIR	CLEARWATER FL 34623 33763
D	LUSK, C. S.	187 HAWTHORNE RD	BRIANTREE MA 02184
		REINSTATEMENT 99	TS
			100003090421--2
			01/06/00--01022--023
			****245.00 ****245.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LEACH, EARL F 2519-A ROYAL PINES CIR CLEARWATER FL 34623	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State FL Zip Code
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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

EARL F. LEACH  
REGISTERED AGENT MUST SIGN

Date 12-23-99

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(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 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 furnished on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

EARL F. LEACH

SIGNATURE: EARL F. LEACH  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-23-99 727  
796-3844  
Date Daytime Phone #