

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

01 MAY 23 PM 6:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **N98000803750**

1. Corporation Name

**Rainbow Shelter for Women & Families Inc**

2. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

**1931 N.W. 194th**

**Carol City FL**

**33056 Dade**

**300004431073--5**

**-06/20/01--01004--015**

**\*\*\*\*123.50 \*\*\*\*123.50**

4. Date Incorporated or Qualified  
To Do Business in Florida

**June 24 1998**

5. FEI Number

**650826897**

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

**Loretta Jones Ford**

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

**1931 N.W. 194th Terr.**

Suite, Apt. #, Etc.

City

**Carol City**

State

**FL**

Zip Code

**33056**

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

**Loretta Jones Ford CEO**

REGISTERED AGENT MUST SIGN

Date **May 16 2001**

**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
<b>CEO</b>	<b>Loretta Ford</b>	<b>1931 N.W. 194th Terr. Carol City</b>	<b>Carol City FL 33056</b>
<b>Secretary</b>	<b>Kersetta Bussey</b>	<b>20902 N.W. 39 Ave.</b>	<b>Carol City FL 33056</b>
<b>Treasurer</b>	<b>Dwayne C. Ford</b>	<b>6156 Kenton Oaks</b>	<b>Lithonia Ga. 30058</b>
<b>Committee</b>	<b>Ophelia Carrott</b>	<b>11775 S.W. 213 St.</b>	<b>Princeton Fla. 33832</b>
<b>T</b>	<b>Marjorie McKenzie</b>	<b>11435 S.W. 133 Terr.</b>	<b>Mia. FL 33176</b>
<b>T</b>	<b>Hydia Thompson</b>	<b>1230 N.W. 9th Ave.</b>	<b>Mia. FL 33136</b>

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:

**Loretta Jones Ford**

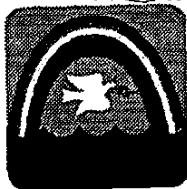
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**May 16 01 305-621-9258**

Date Daytime Phone #

CR2081 (9/00)

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### EXECUTIVE DIRECTORS + COMMITTEE

1. Opleia Carrott  
11775 S.W. 213 ST.  
T Princeton, Fla, 33032

*Opleia R. Carrott*

2. Marjorie McKenzie  
11435 S.W. 133 Terr.  
T Mia, Fla, 33176

*Marjorie McKenzie*

3. Lydia Thompson  
1230 N.W. 9<sup>th</sup> Ave.  
T Mia, Fla, 33136

*Lydia Thompson*

4. Lorretta Ford  
1931 N.W. 194 Terr.  
Dir  
CEO Carol City, Fla, 33056

*Lorretta J. Ford*