PLEASE READ A	ALL INST	RUCTIONS	BEFORE C	OMPLET	ING THIS FORM.	
APPLICATION—FOR REINSTATEMENT	FOR Secretary of			FILED		
DOCUMENT # N9900004152				1	PCT 13 AM 8:34	
1. Corporation Name PRIMARY CHARTER SCHOOLS, INC.				SECHETARY OF STATE FALLAHASSEE, FLORIDA		
		·				
Principal Place of Business 3535 TODD LANE MIMS FL 32754	ANE 3535 TODD LANE			REINSTATEVIERT ₁₃		
If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable				Date Incorporated or Qualified		
Suite, Apt. #, etc.	etc.	To Do Business in Florida		07/02/	1999	
City & State City & State				5. FEI Numbei	59-3588811	Applied For Not Applicable
Zip Country	Zip	Country	у	6. CERTIFICATE OF STATUS DESIRED Of Status		
7. Names and Street Addresses of Each Officer and/o	or Director (Flo	rida nonprofit corpora	tions must list at lea	ast 3 directors)		
Title(s) Name of Officers and/or Directors	Street Address of Each Officer and/or Director			City / State / Zip		
TUMBLIN, WILLIAM		325 INDIAN RIVER AVENUE		TITUSVILLE FL 32796		
MUTTER, BOBSY		3485 JOHNS ROAD		MIMS FL 32754		
SHARKEY, RAY		4245 ABBEY LANE		TITUSVILLE FL 32780		
D · BOLTON, JIM	BOLTON, JIM		3505 MELODY LANE		TITUSVILLE FL 32796	
€ RAVINDRAN, AMBIKA	RAVINDRAN, AMBIKA		7139 N. HWY 1		PORT ST. JOHN FL 32927.	
+D HIGGINGBOTHAM, PAULA	HIGGINGBOTHAM, PAULA		1874 N. CARPENTER RD.		TITUSVILLE FL 32706	
8. Name and Address of Current F	legistered Age	ent	None	9. Name and	Address of New Registered Agen	t
CLIFFORD, ELAINE F						
3535 TODD LANE			Street Address (P.O. Box Number is Not Acceptable)			
			Suite, Apt. #, Etc	10/13/0301113010 **236.25		
			City		State Zij	Code
10. I, being appointed the registered agent of the above	e named corpo	pration, am familiar wi	th and accept the o	bligations of Secti		S.
Signature of Registered Agent	1 Ps	Mad	Ph.O.		Date (0/9/0	3

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 filling 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 the signature shall have the same legal effect as if made under oath.

REGISTERED AGENT MUST SIGN

SIGNATURE: SIGNATURE AND TYPED STRENGTON NAME OF SIGNING OFFICER OR DIRECTOR

10/9/2003

Daytime Phone #

PRIMARY CHARTER SCHOOLS, INC. BOARD OF DIRECTORS 2003-2004

James Bolton
3505 Melody Lane
Titusville, FL 32796

Chairperson / Director

William Tumblin 325 Indian River Avenue Titusville, FL 32796 268-1108 Treasurer

Deborah Blaylock 6000 Ackard Avenue Cocoa, FL 32937 633-5523 Secretary

Carmine Ferraro 4265 Quechua Road Port St. John, FL 32927 633-3724 Director

Orlenia Lopez 6434 Bamboo Avenue Port St. John, FL 32927 690-0762 Director

Elaine Clifford (Ex-officio) 3535 Todd Lane Scottsmöor, FL 32754 633-8234

Director -