

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 MAY 11 AM 9:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000016842

1. Corporation Name

DIRECT REFERRAL, INC.

800076067368
06/12/06--01013--001 **1050.00

2. Principal Office Address
227 W. New England Ave.

Suite, Apt. #, etc.
A

City & State
Winter Park, Florida

Zip
32789

Country
Orange

3. Mailing Office Address
227 W. New England Ave.

Suite, Apt. #, etc.
A

City & State
Winter Park, Florida

Zip
32789

Country
Orange

REINSTATEMENT

04-06

4. Date Incorporated or Qualified
To Do Business in Florida **02/19/1999**

5. EFL Number
593560536

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
Charles M. Booth

Street Address (P.O. Box Number is Not Acceptable)
227 W. New England Ave.

Suite, Apt. #, Etc.
A

City
Winter Park

State
FL

Zip Code
32789

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

REGISTERED AGENT MUST SIGN

Date **4/27/06**

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
DP	CHARLES M. BOOTH	241 Arnold Ave.	Longwood, Fl. 32750
DVP	MELISSA LATTY	1560 Lyndale Ave.	Maitland, Fl. 32751
DST	CATHY MARINO	P. O. Box 2337	Winter Park, Fl. 32790

K. Eckel MAY 18 2006

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 contained in Chapter 119, 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:

Charles M. Booth

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/2006 407-622-5555

Date

Daytime Phone #