

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 OCT 30 PM 12:04

DOCUMENT # P99000045855

1. Corporation Name

INVOLVED motivated parents as
CLASSROOM TEACHERS, INC.

2. Principal Office Address

3359 Belvedere RD

Suite, Apt. #, etc.

A

City & State

West Palm Beach, FL

Zip

33406

Country

U.S.A

3. Mailing Office Address

3359 Belvedere RD.

Suite, Apt. #, etc.

A

City & State

West Palm Beach, FL

Zip

33406

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

17 MAY 99

5. FEI Number

65-0923476

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

09-18-00 90149 050 \$150.00

7. Name and Address of Current Registered Agent

Name

ALPHONSO S. MILLIGAN, ESQUIRE

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

3910 RCA BOULEVARD

Suite, Apt. #, Etc.

1011

City

Palm BEACH GARDENS

State

FL

Zip Code

33410

900003467659-4

-11/16/00--01051--005

***600.00 ***600.00

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

ALPHONSO S. MILLIGAN, ESQUIRE
REGISTERED AGENT MUST SIGN

Date 24 OCT 00

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
✓ D	CLEVELAND, MICHAEL	418 20th STREET	West Palm Beach, FL 33407
✓ D	MILLIGAN, ALPHONSO	STE 1011, 3910 RCA BLVD	PALM BEACH GARDENS, FL 33410
D	EARLE, JANISE	4201 NW 17th ST	KELLE GRADE, FL 33430
D	BANKS, JOHNNIE MAE	789 MCCLURE RD	PORT KEE, FL 33476
D	GARCIA, LUCILA	BOX 311 South Shore VILLAGE	CLEWISTON, FL
D	ALFARO, MARGARITA	POST OFFICE BOX 450 CANAL POINT, FL 33438	Canal Point, FL 33438
✓ D	HALL, JAMES	3300 Westview Avenue	West Palm Beach, Florida 33407

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:

Michael A. Cleveland
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

October 26, 2000 561-640-4532
Date Daytime Phone #