

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 21 PM 3:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F01000003828

1. Corporation Name

PAEP ARCHITECTURE ENGINEERING, P.C.

Principal Place of Business

Mailing Address

1811 FOUR MILE ROAD, N.E.
GRAND RAPIDS MI 49525

1811 FOUR MILE ROAD, N.E.
GRAND RAPIDS MI 49525



REINSTATEMENT

03

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

07/18/2001

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

38-3577401

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PTD	MONCION, DENIS G	1811 FOUR MILE ROAD, N.E.	GRAND RAPIDS MI 49525
SVD	DIK, GLENN A	1811 FOUR MILE ROAD, N.E.	GRAND RAPIDS MI 49525
D	FERAVICH, RANDALL A	1811 FOUR MILE ROAD, N.E.	GRAND RAPIDS MI 49525
D	SCALES, CHERYL C	1811 FOUR MILE ROAD, N.E.	GRAND RAPIDS MI 49525

300023965693

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8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

C T-CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE

Date

REGISTERED AGENT MUST SIGN

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

October 14, 2003 616/361-2404

CR2E040 (7/03)

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October 14, 2003

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

PAEP

PAEP Architecture Engineering, P.C.

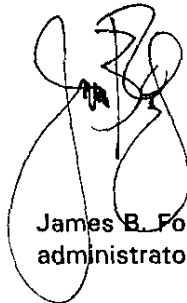
Re: PAEP Architecture Engineering, P.C. Document#: F01000003828
Application For Reinstatement

To whom it may concern:

Enclosed is our completed Application For Reinstatement Form. We have not received any notice of this report. We did file a tax return showing that we did not have any business in Florida in 2002. According to the person in your office I spoke to about this matter, I am submitting this application and \$150 fee, along with this letter of explanation. (Also, I was told that we did not need our registered agent of record to sign the reinstatement form.)

Please contact me at 616/361-2664 if you need further information.

Sincerely,



James B. Fox, SPHR
administrator

cc: Denis Moncion