

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

02 APR 17 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97000001910

1. Corporation Name

TIMOTHY HAAHS & ASSOCIATES, INC.

Principal Place of Business

794 PENLLYN PIKE, SUITE 200
BLUE BELL PA 19422

Mailing Address

794 PENLLYN PIKE, SUITE 200
BLUE BELL PA 19422

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

550 Township Line Rd

Suite, Apt. #, etc.
Suite 100

City & State
Blue Bell, PA

Zip
19422

Country

3. New Mailing Office Address, If Applicable

550 Township Line Rd

Suite, Apt. #, etc.
Suite 100

City & State
Blue Bell PA

Zip
19422

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/14/1997

5. FEI Number

23-2756408

Applied For

Not Applicable

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
CP	HAAHS, TIMOTHY H	1210 KINGSLEY CT	LOWER GWYNEDD PA 19002
VCV	ALARCON, PETRONILO C	2953 APPLIEDALE RD	AUDUBON PA 19406
D	EBERT, E. JAMES	12431 COCONUT CREEK CT	FT MYERS FL 33908
STD	HAAHS, JANICE J	1210 KINGSLEY CT	LOWER GWYNEDD PA 19002
			900005449699--8
			05/03/02--01049--013
			***900.00 ***900.00

8. Name and Address of Current Registered Agent

EBERT, E. JAMES
12431 COCONUT CREEK CT
FT MYERS FL 33908

9. Name and Address of New Registered Agent

Name E. James Ebert
Street Address (P.O. Box Number is Not Acceptable)
16341 Fairway Woods, Dr. #302
Suite, Apt. #, Etc.
City Fort Myers State FL Zip Code 33908

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.

Signature of
Registered Agent

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 4/12/02

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)(l), 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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/02
Date

484-342-0200
Daytime Phone # X

Change of Address

Timothy Haahs & Associates, Inc.
RE: FEI 23-2756408

We are moving.

Please note our new address effective as of Monday, April 29, 2002.

Timothy Haahs & Associates, Inc.
550 Township Line Road, Suite 100
Blue Bell, PA 19422

Tel: 484-342-0200
Fax: 484-342-0222


Janice J. Haahs
VP/CFO