

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAR 16 PM 12:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000007532

1. Corporation Name

APPLIED TECHNOLOGY ACCESS
CENTER, INC.

2. Principal Office Address

520 N. Means Ct.

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 4138

Suite, Apt. #, etc.

City & State

Fort Pierce, FL

City & State

Fort Pierce, FL

Zip

34950

Country

St. Lucie

Zip

34948

Country

St. Lucie

500030499915

03/16/04--01004--015 **70.00

03-14

05-02-03 90399 042 \$61.25

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

30-0090306

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

John L. George

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

2112 S.W. Vixen Ct.

Suite, Apt. #, Etc.

City

Port Saint Lucie

State

FL

Zip Code

34953

REINSTATEMENT

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

[Signature]

REGISTERED AGENT MUST SIGN

Date

3/09/04

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
P/c	John L. George	2112 S.W. Vixen Ct.	Port St. Lucie, FL 34953
S	Portia F. George	707 North 19th St.	Fort Pierce, FL 34950
T	Mary L. Ellis	2112 S.W. Vixen Ct.	Port St. Lucie, FL 34953
D	Johnny Bennett	3211 Sherwood Blvd	Delray Beach, FL 33445
D	Roderick Waller	1274 S.W. Cedar Cove	Port St. Lucie, FL 34986

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/04 (772-461-0446)

Date

Daytime Phone #

CR2E081 (3/1/04)

65

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APPLIED TECHNOLOGY ACCESS CENTER, INC.

**P.O. Box 4138
Fort Pierce, FL 34948**

To: Secretary Of State

From: Applied Technology Access Center (ATAC)

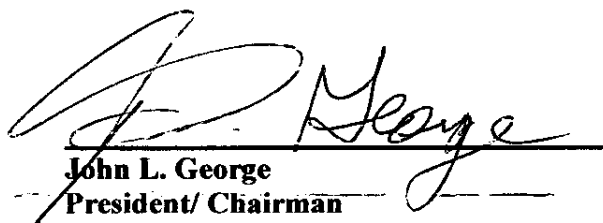
Attn: Non-Profit Corporation Reinstatement and Exempt

We did not receive the 2003 corporation application. We moved from 3213 Oleander to another location. If you need more information from me please don't hesitate to contact me on this matter. We need to be reinstated as soon as possible, because we are now working on getting a grant from the city of Fort Pierce and we need this completed before they will release any funds.

Physical Address: 520 Mean Court
Fort Pierce, Florida 34950

Mailing Address: P.O. Box 4138
Fort Pierce, Florida 34948

FEI Number: 30-0090306


John L. George
President/ Chairman