

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



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

FILED

00 MAY 19 PM 12: 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **097000104463**

1. Corporation Name

TECTONICS INTERNATIONAL Corporation
2000-12852

Principal Place of Business

Mailing Address

13000 SAWGRASS VILLAGE CIRCLE
SUITE 30
ROUTE VEDRA BEACH, FL. 32082

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

REINSTATEMENT 98.00

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date incorporated or Qualified To Do Business in Florida

12-10-97

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEL Number

59-3493469

Applied **SP**

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED **\$275** 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Chairman & CEO	L. JOE Scallan	232 LAUREL LANE Route	Route Vedra Beach, FL 32082
President & Sec/Treas	Arthur Shenker, Jr.	100 Twelve Oaks	Route Vedra Beach, FL 32082
Dir	Hamilton Jordan	1371 Wesley Parkway	Atlanta, GA 30327
			3000003265243-7 -05/24/00--01061--003 ***1058.75 ***1058.75

8. Name and Address of Current Registered Agent

MICHAEL A. WALTERS
50 NORTH LAURA ST.
SUITE 2200
JACKSONVILLE, FL 32202

9. Name and Address of New Registered Agent

Name **MICHAEL A Walters**
Street Address (P.O. Box Number is Not Acceptable)
50 North Laura Street
Suite, Apt. #, Etc.
Suite 2200
City **Jacksonville** State **FL** Zip Code **32202**

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

Michael Walters

REGISTERED AGENT MUST SIGN

Date

5/18/2000

11. This corporation owes the current year Intangible Personal Property Tax due June 30.

Yes No

(See other side for information on intangible tax.)

12. 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:

L. Joe Scallan
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

16 May 00
Date

(904) 543.0500
Daytime Phone #