


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *pg 1 of 2*

<b>APPLICATION FOR REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		<b>FILED</b>  99 JAN -8 PM 4:10  SECRETARY OF STATE TALLAHASSEE, FLORIDA	
<b>DOCUMENT #</b>					
1. Corporation Name <i>F94000000143</i>  CPI HOLDINGS, INC.					
Principal Place of Business  188 East Capitol Street, Suite 300 Jackson, Mississippi 39201			Mailing Address		
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 Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida  1/11/94	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number  04-3215850	
City & State		City & State		Applied For Not Applicable	
Zip		Country		6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 Directors)					
1	Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4	City/State/Zip
		SEE ATTACHED LIST			
					300002740719-7 01/13/99-01103-026 ***1217.50 ***1208.75
					300002740719-7 01/13/99-01103-027 *****17.50 *****17.50
8. Name and Address of Current Registered Agent					
C T Corporation System 1200 S. Pine Island Road Plantation, Fla. 33324					
9. Name and Address of New Registered Agent					
Name					
Street Address (P.O. Box Number is Not Acceptable)					
Suite, Apt. #, Etc.					
City					
State <b>FL</b>					
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.					
Signature of Registered Agent <i>Connie Bryan</i> <i>Connie Bryan, Spec Asst. Secy</i> Date <i>1/8/99</i> REGISTERED AGENT MUST SIGN					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3) (k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: <i>Diane W. Haynes</i> January 6, 1998 (601) 354-3555 SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

pg 2

**DIRECTORS AND OFFICERS OF CPL HOLDINGS, INC.**

**DIRECTORS:**

Leland R. Speed  
David H. Hoster II  
N. Keith McKey

**OFFICERS:**

Leland R. Speed, Chairman and CEO  
David H. Hoster II, President  
N. Keith McKey, Executive Vice President, CFO, and Secretary  
Diane W. Hayman, Controller  
Marshall A. Loeb, Vice President  
Jann Puckett, Vice President  
Brent W. Wood, Assistant Controller  
Kenneth R. Redford, Assistant Controller

**ADDRESS:**

188 East Capitol Street, Suite 300  
Jackson, Mississippi 39201