

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

01 JUN 27 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 220473

1. Corporation Name

Tampa Bay Jr. Posters, Inc.

2. Principal Office Address

5001 West Lemon Street

Suite, Apt. #, etc.

City & State

Tampa, Florida

Zip

33609

Country

3. Mailing Office Address

5001 West Lemon Street

Suite, Apt. #, etc.

City & State

Tampa, Florida

Zip

33609

Country

REINSTATEMENT

00-01

**4. Date Incorporated or Qualified
To Do Business in Florida**

2-19-59

5. FEI Number

59 094 4733

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

R. Reid Haney, Esquire c/o Kalish & Ward

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

101 E. Kennedy Boulevard

Suite, Apt. #, Etc.

4100

City

Tampa

State
FL

Zip Code

33602

70000446094

-07/06/01--01014-004

****300.00 ****300.00

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

R. Reid Haney

REGISTERED AGENT MUST SIGN

Date

6/25/2001

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-D	Ronald W. Hill	908 Worthington Drive	Bridgeport, WV 26330
V-S-D	Cynthia L. Hill	908 Worthington Drive	Bridgeport, WV 26330
V-D	James J. Brawley	5001 West Lemon Street	Tampa, FL 33609

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: James J. Brawley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James J. Brawley

6-21-01

Date

813/207-2010

Daytime Phone #

CR2001 (2/00)