

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 FEB -5 PM 3:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **373618**

1. Corporation Name

ITD LIQUIDATING CORP.

Principal Place of Business

**2544 TERMINAL DRIVE S.
ST PETERSBURG FL 33712**

Mailing Address

**2544 TERMINAL DRIVE S.
ST PETERSBURG FL 33712**

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.
714 Augusta Drive

City & State
Sun City Center, FL

Zip
33573

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.
714 Augusta Drive

City & State
Sun City Center, FL

Zip
33573

Country

REINSTATEMENT **97-98**

4. Date Incorporated or Qualified
To Do Business in Florida

12/01/1970

5. FEI Number

59-1307880

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)

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
POD	WHEELER, DONALD O	2544 TERMINAL DRIVE S.	ST. PETERSBURG FL 33712
VD	MIRRO, FRANK	2544 TERMINAL DRIVE S.	ST. PETERSBURG FL 33712
VD	MICHAUD, STEPHEN D	2544 TERMINAL DRIVE S.	ST. PETERSBURG FL 33712
WSTD	CHERRILL, STEPHEN H	2544 TERMINAL DRIVE S.	ST. PETERSBURG FL 33712
D/P/ S/T	O'Brien, Joseph J.	714 Augusta Drive	Sun City Center, FL 33573

8. Name and Address of Current Registered Agent

**WHEELER, DONALD O
2544 TERMINAL DR. S.
ST PETERSBURG FL 33712**

9. Name and Address of New Registered Agent

Name

Joseph J. O'Brien

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

714 Augusta Drive

Suite, Apt. #, Etc.

City

Sun City Center

State

FL

Zip Code

33573

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

X

REGISTERED AGENT MUST SIGN

Date

1/28/98

11. This corporation owes or has paid 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: **X**

Joseph J. O'Brien

1/28/98

(813) 634-5335

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph J. O'Brien, President

Date

Daytime Phone #

CPRE040 (8/97)