

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

2009 JUL 10 PM 10:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 623075

1. Corporation Name

The I-Thou Entertainment Co.

300158367753  
07/10/09--01055--009 \*\*600.00

**REINSTATEMENT**  
CR2E081 (12/08) 06-09

2. Principal Office Address - No P.O. Box #

4223 HARTWOOD LANE

3. Mailing Office Address

4223 HARTWOOD LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA, FLORIDA

City & State

TAMPA, FLORIDA

Zip

33618-7535 U.S.A.

Zip

33618-7535 U.S.A.

4. Date Incorporated or Qualified  
To Do Business in Florida

1979

5. FEI Number

59-1908109

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

MARILYN SUZANNE MILLER

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

4223 HARTWOOD LANE

Suite, Apt. #, Etc.

City

TAMPA

State

FL

Zip Code

33618-7535

☒ The reinstatement fee is imposed, except in  
circumstances which the entity did not receive  
the prior notices. By checking this box, you  
are certifying the prior notices were not  
received and requesting the reinstatement  
fee be waived.

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

*Marilyn Suzanne Miller*  
REGISTERED AGENT MUST SIGN

Date

July 7, 2009

**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
President	MARILYN SUZANNE MILLER	4223 HARTWOOD LANE	TAMPA, FLORIDA 33618
Vice President	Shirley Hurkel MILLER	13502 PALMWOOD LANE	TAMPA, FLORIDA 33618
Secretary	Judith A. MILLER	31 Great Rock ROAD	Sharborn, MA. 01770
Treasurer	Joanne M. Edwards	1223 E Powhattan Ave.	Tampa, Florida 33604- 7231

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 contained in Chapter 119, 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

*Marilyn Suzanne Miller*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

July 7, 2009 813-964-8250

Daytime Phone #