

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 DEC 14 AM 11:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 838441

1. Corporation Name

ENGINEERING DESIGN GROUP OF OKLAHOMA, INC.

Principal Place of Business

4808 S GARNETT ROAD
ROOM #600
TULSA OK 74146
US

Mailing Address

4808 S GARNETT RD
ROOM #600
TULSA OK 74146
US

If above addresses are incorrect in any way, line through incorrect information and enter correct

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/18/1977

5. FEI Number

73-0785554

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
T	GRIFFIN, RONALD L	4608 S GARNETT RD #600	TULSA, OK 00000
PD	STEWART, WILLIAM T	4608 S GARNETT RD #600	TULSA, OK 00000
VD	STEWART, W T JR	4608 S GARNETT RD #600	TULSA, OK 00000
D	GIVENS, JACK R	3800 FIRST NATIONAL TOWE	TULSA, OK 00000
			7000002719587--7
			-12/22/98--01085--001
			****750.00 ****750.00

8. Name and Address of Current Registered Agent

ADAMS, ADAM G. II
314 DUVAL FEDERAL BLDG.
135 W. BAY ST.
JACKSONVILLE FL 32203

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

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

ADAMS, ADAM G. II

Date 12/01/98

REGISTERED AGENT MUST SIGN

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 made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ronald L. Griffin

Treasurer

Date

Daytime Phone #

12-9-98 918-252-7680

CR20040 (9/98)