

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

97 SEP -8 AM 11:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 850013

1. Corporation Name

JOHN SEXTON & Co.

Principal Place of Business

Mailing Address

1050 WARRENVILLE RD.
LISLE, IL 60532

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 Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

8-11-81

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

36-314370

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

18702

USA

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)

SEE ATTACHED ADDENDUM

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

* See attached

9000002289909-- 1
-09/10/97--01122--004
****923.75 ****923.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324

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

ANN J. WILLIAMS

REGISTERED AGENT MUST SIGN

Assistant Vice President

Date

Sept. 2, 1997

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes.

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANN B. CIANFLORE, SECRETARY

Date

717- 831- 7500

Daytime Phone #

2012

ADDENDUM

JOHN SEXTON & CO. Officers and Directors List

OFFICERS:

- | | | | |
|---|-----------------------|---|---|
| ① | Mark Van Stekelenburg | - | Chairman of the Board,
President and CEO |
| ② | Harold E. Feather | - | Executive Vice President Operations |
| ① | David F. McAnally | - | Vice President and CFO |
| ① | Richard J. Martin | - | Vice President |
| ① | Ann B. Cianflone | - | Secretary |
| ① | Kenneth B. Kozel | - | Treasurer |
| ② | Thomas F. Flanagan | - | Assistant Secretary |
| ① | Thelma J. Marshall | - | Assistant Secretary |

DIRECTORS:

- | | |
|---|-----------------------|
| ① | Mark Van Stekelenburg |
| ① | David F. McAnally |
| ① | Richard J. Martin |
| ② | Harold E. Feather |

All of the foregoing Officers and Directors, except for Harold E. Feather and Thomas F. Flanagan, maintain business addresses at:

①

613 Baltimore Drive
East Mountain Corporate Center
Wilkes-Barre, Pennsylvania 18702-7944

Harold E. Feather and Thomas F. Flanagan maintain a business address at:

②

1050 Warrenville Road
Lisle, Illinois 60532