

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F01000002863

1. Corporation Name

CREO AMERICAS, INC.

Principal Place of Business

Mailing Address

8 OAK PARK DRIVE  
BEDFORD MA 01730

8 OAK PARK DRIVE  
BEDFORD MA 01730

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

3 Federal Street

3 Federal Street

City & State

City & State

Billerica, MA

Billerica, MA

Zip

01821

Country

USA

Zip

01821

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

05/29/2001

5. FEI Number

36-4017257

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	LEITNEY, LARRY	<del>8 OAK PARK DRIVE</del> 3 Federal St.	<del>BEDFORD MA 01730</del> Billerica, MA 01821
V	DROR, ARNON	<del>8 OAK PARK DRIVE</del> 3 Federal St.	<del>BEDFORD MA 01730</del> Billerica, MA 01821
V	<del>CIARAMELLA, MICHAEL</del> *	<del>8 OAK PARK DRIVE</del>	<del>BEDFORD MA 01730</del>
T	<del>CARTER, DONALD</del> *	<del>8 OAK PARK DRIVE</del>	<del>BEDFORD MA 01730</del>
VS	MOORE, MARCIA	<del>8 OAK PARK DRIVE</del> 3 Federal St.	<del>BEDFORD MA 01730</del> Billerica, MA 01821
	*See Attachment		

REINSTATEMENT 03

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
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. or 617.0505, F.S.

AMY BERTELETTI

SPECIAL ASSISTANT SECRETARY

Signature of  
Registered Agent

*Amy Berletti*

REGISTERED AGENT MUST SIGN

Date

12/3/03

11. 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:

*Marcia L Moore*

MARCIA L. MOORE

11-05-03

Date

978-439-7180

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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**ATTACHMENT - Creo Americas, Inc.**

Title(s)	Name	Business Address	Expiration of Term
T	Arnon Dror, Treasurer	3 Federal Street, Billerica, MA 01821	Until their Successors are duly elected and qualified, or until their earlier resignation or renewal.
V	Patrick Morrissey, Vice President-Sales	3 Federal Street, Billerica, MA 01821	