

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

03 OCT 28 AM 9:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT 03



300024197183  
10/28/03--01023--008 \*\*150.00

DOCUMENT # F02000005718

1. Corporation Name

WRITE WOMAN COMPUTER PRODUCTS INC

Principal Place of Business

Mailing Address

1400 GANDY BLVD  
ST. PETERSBURG FL 33702

2320 BRIGHTON HEN TL RD  
ROCHESTER NY 14623

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.

3312 11th St N

Suite, Apt. #, etc.

Suite 4

City & State

St Petersburg FL

City & State

Zip

Country

Zip

Country

33704

4. Date Incorporated or Qualified  
To Do Business in Florida

11/14/2002

5. FEI Number

16-1288805

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
P	THOMPSON, JANICE	2320 BRIGHTON HENRIETTA TL ROAD	ROCHESTER NY 14623
V	VITELLO, KRISTEN A	2320 BRIGHTON HENRIETTA TL ROAD	ROCHESTER NY 14623
S	CARSON, AVIS E	2320 BRIGHTON HENRIETTA TL ROAD	ROCHESTER NY 14623
T	ROBBINS, DIANE	2320 BRIGHTON HENRIETTA TL ROAD	ROCHESTER NY 14623

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ROBBINS, STACY  
1400 GANDY BLVD.  
ST. PETERSBURG FL 33702

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.

Signature of  
Registered Agent

*[Signature]*  
REGISTERED AGENT MUST SIGN

Date

10/22/03

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:

*[Signature]* AVIS E CARSON  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/23/03

Daytime Phone #

585 -  
272-0960  
X 33

CR2E040 (7/03)



Phone: (585) 272-0960  
Toll Free: (800) 466-9927  
Fax: (585) 272-1628

October 24, 2003

Division of Corporations  
Annual Report/Reinstatement Section  
P.O. Box 6327  
Tallahassee, FL 32314-6327

Re: Application for Reinstatement  
Document# F02000005718

To Whom It May Concern:

This letter is to notify you that Write Woman Computer Products has never received the two prior notices from your office. We would have definitely filed the UBR form upon receipt because we want to continue doing business in Florida. Please find enclosed our check for \$150.00.

Sincerely,

A handwritten signature in cursive script that reads 'Avis E Carson'.

Avis E Carson  
Controller  
Write Woman Computer Products Inc.  
(585) 272-0960 x33  
[avis@writewoman.com](mailto:avis@writewoman.com)

2320 Brighton-Henrietta TL Rd.  
Rochester, NY 14623

Visit us at: [www.writewoman.com](http://www.writewoman.com)  
E-mail us at: [infor@writewoman.com](mailto:infor@writewoman.com)