

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 DEC -1 AM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F92000000051

1. Corporation Name

FAIRFIELD ST. CROIX, INC.

Principal Place of Business

2800 CANTRELL ROAD
LITTLE ROCK AR 72202

Mailing Address

2800 CANTRELL ROAD
LITTLE ROCK AR 72202

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

10/29/1992

Suite, Apt. #, etc.

Suite, Apt. #, etc.

11001 Executive Center Dr.

11001 Executive Center Dr.

City & State

City & State

Little Rock, AR

Little Rock, AR

Zip

Zip

72211

72211

Country

Country

5. FEI Number

59-2466062

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
PD	MCCONNELL, JOHN W	2800 CANTRELL ROAD	LITTLE ROCK AR 72202
VSD	DUMENY, MARCEL J	2800 CANTRELL ROAD	LITTLE ROCK AR 72202
VAS	GUNTER, JOE T	2800 CANTRELL ROAD	LITTLE ROCK AR
V	KLING, DANIEL	2800 CANTRELL ROAD	LITTLE ROCK AR 72202
VT	HOWETH, ROBERT W	2800 CANTRELL ROAD	LITTLE ROCK AR 72202
AS	BENNETT, WILLIAM J	2800 CANTRELL ROAD	LITTLE ROCK AR 72202

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is not acceptable)

Suite, Apt. #, Etc.

City

State

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

Vicky Goldstein

VICKY GOLDSTEIN

REGISTERED AGENT MUST BE SPECIAL ASSISTANT SECRETARY

Date

11/25/97

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 if made under oath.

SIGNATURE:

W. Bennett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/5/97

Daytime Phone #