

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 FEB 24 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000000242

1. Corporation Name

THE STANDARD COMPANIES, INC.

Principal Place of Business

640 MAGAZINE STREET
NEW ORLEANS LA 70130

Mailing Address

640 MAGAZINE STREET
NEW ORLEANS LA 70130

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.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/04/1993

5. FEI Number

72-1226186

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
CD	REILY, ROBERT D	640 MAGAZINE STREET	NEW ORLEANS LA 70130
PD	MAURER, ROBERT	640 MAGAZINE STREET	NEW ORLEANS LA 70130
ST	GREGORIO, ANTHONY	640 MAGAZINE STREET	NEW ORLEANS LA 70130
AS	HERRMANN, HAROLD M JR.	640 MAGAZINE STREET	NEW ORLEANS LA 70130
AS	COULTER, JOAN	640 MAGAZINE STREET	NEW ORLEANS LA 70130
DS	REILY, W.B. III	640 MAGAZINE STREET	NEW ORLEANS LA 70130

8. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Numbers Not Acceptable)

City

REINSTATEMENT

200002440522--5

702/25/98--01057--014

****750.00 ****750.00

FL

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

Anthony Gueorgis
REGISTERED AGENT MUST SIGN

Assistant Secretary

Date 2-6-98

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Anthony Gueorgis

1/21/98 304.524631
Date Daytime Phone #

CFR2040 (8/97)