

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000003699

1. Corporation Name

SONITROL SOUTHEAST, INC.

Principal Place of Business

Mailing Address

520 HOWARD CT.
CLEARWATER FL 34616 33756

520 HOWARD CT.
CLEARWATER FL 34616 33756

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

07/14/1994

5. FEI Number

59-3249778

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
D C	BRAYMAN, JOHN A. Fuqua, Gary S.	900 S SHACKLEFORD RD., SUITE 210 639 Loyola Ave.	LITTLE ROCK AR New Orleans, LA
VP	REFSELL, STEPHEN T	900 S SHACKLEFORD RD., SUITE 210	LITTLE ROCK AR
R V/T	ROONEY, JOHN J. McNeal, Steven C.	520 HOWARD COURT- 639 Loyola Ave.	CLEARWATER FL- New Orleans, LA
DCEQ/P	CARTER, DAVID W	3809-BERYL ROAD 333 Six Forks Rd.	RALEIGH NC
TS V/S	BOYER, LYNN A. Tierney, John E.	3809-BERYL RD 333 Six Forks Rd.	RALEIGH NC

REINSTATEMENT

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

The Prentice-Hall Corporation System, Inc.
1201 HAYS ST., #105
TALLAHASSEE FL 32301

Name

CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

Suite, Apt. #, Etc.

000002703540-5

-12/04/98--01113--001

City

Tallahassee

****758

State

FL

32301

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

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 12-2-98

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

David W. Carter

11/23/98

Date

(919) 821-1150

Daytime Phone #

CR2040 (9/98)