	PLEASE READ	ALL INST	→ FRUCTÌ	BEFORE C	OMPLET	ING THIS FO	RM.	
	PLICATION FOR ISTATEMENT	A DEPART Sandra B. Secretary of S IVISION OF CORPO	NT OF STATE <b>Stham</b> State					
DOCUMENT # F9400005519								
	IÁN L. NORRIS P.C.			97 DEC 30 AM 8: 05				
		<u> </u>			SECTATION OF STATE TALL ANASSES, FLORIDA			
BOX 29 HK BOX 29 HK	Piace of Business DLLOW ROAD DLLOW ROAD VILLE PA 19421	BOX 29 HOL	Mailing Address  BOX 29 HOLLOW ROAD  BIRCHRUNVILLE PA 19421  US			REINSTATEMENT 9		
	addresses are incorrect in any way, line the incipal Office Address, if Applicable		nformation and enter		{	orated or Qualified	ENI O	•_₁
Sulte, Apt.		Sulte, Ap1. #,		719711011010	To Do Busin	ess in Florida	10/25/1994	
City & Stat	6	City & State			5. FEI Number	22-2109453	Applied For Not Applicable	}
Zip Country		Zip	Country		6. CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status			đ
7. Names	/. Names and Street Addresses of Each Officer and/or Director (Floride nonprofit Name of Officers			ations must list at lea	·			_
Title(s) and/or Directors			Officer and/or Director  (Do NOT Use Post Office Box			4 C	ity / State / Zip	_
CP	NORRIS, NORMAN L P.C. 27596 F			INK DRIVE		BONITA SPRINGS FL 33923		
VSD	NORRIS, NANCY T		27596 RIVER BA	NK DRIVE	81	BONITA SPRINGS DDD23: -01/06/9 ****750	FL 91348-8 8-01075-022 .00_****750.00	
	8. Name and Address of Current	ent	9. Name and Address of New Registered Agent Name				1,6%	
<sup>1</sup> , 27596	is, norman l p.C. River Bank dr. 'A springs fl 33923		Street Address (P.O. Box Number is Not Acceptable)  Sulte, Apt. #, Etc.				CROFFORD	
:			City			State Zip Code		
Signature of Registered	Agent	FGISTERED AG as paid th	e current ye	deal	No D	Date 2/16	ner side for Information	
12. I certify this rein owed b	that I am an officer or director or the receinstatement application, the reason for disso y the corporation have been paid and the application is true and accurate, and my significant in the corporation of the corporation is true and accurate.	ver or trustee en	npowered to execute eliminated, the corpo	this application as porate name satisfies	rovided for in cha the requirements	of section 607.0401 or	617.0401, F.S., that all fees	144