

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

APPROVED AND FILED

98 DEC 31 PM 2:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000000907

1. Corporation Name

SAIN ASSOCIATES, INC.

Principal Place of Business

Mailing Address

244 WEST VALLEY AVENUE, SUITE 200
BIRMINGHAM AL 35209

244 WEST VALLEY AVENUE, SUITE 200
BIRMINGHAM AL 35209

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

02/23/1995

5. FEI Number

63-0635669

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
PCEO	SAIN, CHARLES H	244 WEST VALLEY AVE SUITE 200	BIRMINGHAM AL 35209
VS	INGRAM, KAREN S	244 WEST VALLEY AVE SUITE 200	BIRMINGHAM AL 35209
P	SAIN, CHARLES R	244 WEST VALLEY AVE SUITE 200	BIRMINGHAM AL 35209
V	HUFFSTUTLER, J. KELLY	244 WEST VALLEY AVE SUITE 200	BIRMINGHAM AL 35209
V	GIBSON, R. BRUCE	244 WEST VALLEY AVE SUITE 200	BIRMINGHAM AL 35209
VP	BLACK JR., ROBERT J.	244 West Valley Ave Suite 200 3576 HAMSHIRE DR.	BIRMINGHAM AL 35209

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

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

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

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

Dale W. Morris

DALE W. MORRIS
ASSISTANT VICE PRESIDENT

Date

12/28/1998

REGISTERED AGENT MUST SIGN

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:

Karen S. Ingram
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-14-98
Date

205 940 6420
Daytime Phone #

CR2E040 (0/98)

SAIN ASSOCIATES, INC.
244 West Valley Avenue, Suite 200
Birmingham, Alabama 35209-3542
Phone: 205-940-6420
Fax: 205-940-6436

OFFICERS AND DIRECTORS:

NAME

Charles H. Sain, P.E.
Charles R. Sain
Karen S. Ingram
Robert J. Black, Jr., P.L.S.
Joseph E. Meads, P.E.
James A. Meads, P.E.
Gary M. Curl, P.E.

POSITION

Chairman of the Board
President and Treasurer
Vice President and Corp. Secretary
Vice President
Vice President
Sr. Vice President
Vice President