

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1

APPLICATION
REINSTATEMENT



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

DOCUMENT # F95000003569

1. Corporation Name

TV TEMPS, INC.

Principal Place of Business

3082 EVERGREEN PARKWAY, SUITE F
PO BOX 2101
EVERGREEN CO 80439

Mailing Address

3082 EVERGREEN PARKWAY, SUITE F
PO BOX 2101
EVERGREEN CO 80439

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

07/24/1995

5. FEI Number

84-1302031

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
C	MCLEAN, HEIDI	31218 WHISTLER COURT	EVERGREEN CO 80439
VC	MCLEAN, GORDON	31218 WHISTLER COURT	EVERGREEN CO 80439
D	TORRE, NORMAN	PO BOX 1629 N/A	EVERGREEN CO 80439
D	YOUNG, JOYCE	30922 HILLTOP DRIVE	EVERGREEN CO 80439
			7000002360447--6 -12/02/97--01041--008 ****165.00 ****165.00

8. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

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

John S. Hoening
ALL REGISTERED AGENTS MUST SIGN

Date

11/20/97

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11-17-97

Daytime Phone #

303-674-8455

CR2E040 (8/97)

November 14, 1997

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

I am writing this letter in response to a notice we received concerning our corporation status. In this notice is states that our privileges in the state of Florida have been revoked. This is the first notice I have received regarding this matter. Prior to my taking over the payrolls, we had a payroll service that took care of all such matters. I spoke with Amy Allen, from your offices, on Friday, November 14, 1997 and she stated that we should fill out the application to reinstate our corporation privileges and enclose a check for \$ 165.00. She also stated that we were to write a letter stating that we had never received the other notices and that the reinstatement penalty would be waived and our privileges to conduct business in the state of Florida would be reinstated. I have enclosed the requested application as well as the fee of \$ 165.00, and I am now aware that this form and fee must be received every year by May 1.

If you have any questions please give me a call at 303-670-0303.

Sincerely

Cindy French

Cindy French
Payroll Manager