

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. PAGE 1 of 2

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # F95000003843

1. Corporation Name

LIEBER II CORP.

Principal Place of Business

2500 WESTCHESTER AVE.  
PURCHASE NY 10577

Mailing Address

TWO FIRST UNION CENTER 0200  
CHARLOTTE NC 28298

FILED

98 DEC 11 PM 3:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



REINSTATEMENT

98  
ad

If above addresses are incorrect in any way, line through incorrect information and enter correct

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

08/09/1995

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

56-1872375

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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	WAGONER, RICHARD K	ONE FIRST UNION CENTER	CHARLOTTE NC 28288
<del>V</del> V	<del>LEIGHTON, WARREN R</del> DAVID W. REED	<del>TWO FIRST UNION CENTER</del> TWO FIRST UNION CENTER	<del>CHARLOTTE NC 28288</del> CHARLOTTE, NC 28288
T	HATCH, JAMES H	TWO FIRST UNION CENTER	CHARLOTTE NC 28288
S	HATHAWAY, KENT S	TWO FIRST UNION CENTER	CHARLOTTE NC 28288
D	WAGONER, RICHARD K	ONE FIRST UNION CENTER ONE FIRST UNION CENTER	CHARLOTTE NC 28288
D	COLVIN, BARBARA J	ONE FIRST UNION CENTER	CHARLOTTE NC 28288

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.

1201 Hays Street  
Tallahassee FL 32301

Name

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

800002713428--9

Suite, Apt. #, Etc.

-12715738-01087-019

City

\*\*\*\*750.00 \*\*\*\*750.00

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

Karen B. Rozar, Asst. Sec.  
Corporation Service Company

REGISTERED AGENT MUST SIGN

Date 12/11/98

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 REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/14/98  
Date

(604) 374-6841  
Daytime Phone #

Profit Corporation Annual Report  
Signing Officer and Address

Title: Tax Officer

Name: John Chepul

Street Address: Two First Union Center, NC0200

City-ST-Zip: Charlotte, N.C. 28288-0200