

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



**APPLICATION
FOR
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 AUG 15 AM 11:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000004516

1. Corporation Name

Storcomm, Inc.

Principal Place of Business

~~9605 Scranton Road
Suite 250
San Diego, CA 92121~~

Mailing Address

~~9605 Scranton Road
Suite 250
San Diego, CA 92121~~

Handwritten initials
700004547527--7
-08/21/01--01072--025
****900.00 ****900.00
REINSTATEMENT 00-01

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
7 Corporate Plaza

Suite, Apt. #, etc.
8649 Baypine Road

City & State
Jacksonville, FL

Zip
32256

Country
USA

3. New Mailing Office Address, If Applicable
7 Corporate Plaza

Suite, Apt. #, etc.
8649 Baypine Road

City & State
Jacksonville, FL

Zip
32256

Country
USA

4. Date Incorporated or Qualified To Do Business in Florida 9/18/95

5. FEI Number
330675762

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
PD	Elliott, Samuel G.	7 Corporate Plaza 8649 Baypine Road	Jacksonville, FL 32256
CD	Sym-Smith, C.I.	7 Corporate Plaza 8649 Baypine Road	Jacksonville, FL 32256
VCTO	Treiber, George M.	7 Corporate Plaza 8649 Baypine Road	Jacksonville, FL 32256
D	Peters, Bradford G.	7 Corporate Plaza 8649 Baypine Road	Jacksonville, FL 32256

8. Name and Address of Current Registered Agent

The Prentice-Hall Corporation System,
Inc.
1201 Hays Street, Suite 105
Tallahassee, Florida 32301

9. Name and Address of New Registered Agent

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
Suite, Apt. #, Etc.
City Tallahassee, State FL Zip Code 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

Handwritten signature of Brian Courtney

BRIAN COURTNEY, ASST. V.P.

REGISTERED AGENT MUST SIGN

Date

6/7/01

11. This corporation owes 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

Handwritten signature

Date

Daytime Phone #

6-20-01 904-731-1289

CPRE081 (12/00)