

# F95000004709

## STATE OF FLORIDA OFFICE OF THE COMPTROLLER APPLICATION FOR REFUND

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section \_\_\_\_\_, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: MOR-MAC SERVICES, INC. EIN or SS#: \_\_\_\_\_

Address: 4960 Basswood Drive  
Columbus, GA 31909

Amount: \$35.00 Date Paid 3-6-97

Reason for claim: Withdrawal of change of registered agent and office for Mor-Mac Services, Inc., #F95000004709.

THELMA LEWIS/AMENDMENTS

Certified true and correct this \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_.

Signature \_\_\_\_\_

\* Must be completed if authority is other than Section 215.26, Florida Statutes.

| <i>For Agency Use Only</i>  |  |
|---|--|
| Agency recommends approval of above claim and submits the following information to substantiate the claim:  | Amount of recommended refund \$ <u>35.00</u> |
| The amount requested above was originally deposited into the State Treasury as a part of the funds deposited on State Treasurer's Receipt No. <u>01160 015</u> dated <u>2-17-97</u> |  |
| Name of Account _____<br><div style="text-align: center; font-weight: bold;">45202130001453000000000010000</div>  |  |
| Statutory Authority for Collection <u>607.0122</u>  |  |
| It is requested that payment be made from the following account:  |  |
| NAME OF ACCOUNT: _____<br><div style="text-align: center; font-weight: bold;">452021300014530000000022002000</div>  |  |
| Certified true and correct this _____ day of _____, 19 _____  |  |
| Department of State Division of Corporations<br>(Agency)  | _____<br>(Authorized Signature and Title)    |



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

February 24, 1997

MOR-MAC SERVICES  
4960 BASSWOOD DRIVE  
COLUMBUS, GA 31909

SUBJECT: MOR-MAC SERVICES, INC.  
Ref. Number: F95000004709

We have received your document for MOR-MAC SERVICES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Our records indicate the current name and address of the registered agent is as shown on the attached computer printout. If the address of the registered office is changing, please provide an acceptable address in #3.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6905.

Thelma Lewis  
Corporate Specialist Supervisor

Letter Number: 597A00009670

3/2/97

*My reply:*

*I did not realize you had the current information. The registered name and address you have on file is correct & current.*

*My previous notification on this was apparently misfiled - Please excuse my error & return my check*

*Thank You*

*Sandra Mortham*

MOR-MAC SERVICES  
4960 BASSWOOD DRIVE  
COLUMBUS, GA 31909

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in      ☐ Pick up time \_\_\_\_\_      ☐ Certified Copy  
☐ Mail out      ☐ Will wait      ☐ Photocopy      ☐ Certificate of Status

| NEW FILINGS              |                   |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit            |
| <input type="checkbox"/> | NonProfit         |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication     |
| <input type="checkbox"/> | Other             |

| AMENDMENTS               |  |
|--------------------------|--|
| <input type="checkbox"/> | Amendment                              |
| <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Change of Registered Agent             |
| <input type="checkbox"/> | Dissolution/Withdrawal                 |
| <input type="checkbox"/> | Merger                                 |

200002089942--1  
-02/17/97-01160-015  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |