


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 JUL 20 PM 1:08 SECRETARY OF STATE TALLAHASSEE, FLORIDA
DOCUMENT # <u>F95000005487</u>				
1. Corporation Name SSPCS Corporation				
Principal Place of Business 3295 Fort Charles Drive Naples, FL 34102		Mailing Address 3295 Fort Charles Drive Naples, FL 34102		
If above addresses are incorrect in any way, line through incorrect information and enter correction below.				
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida November 8, 1995
				5. FEI Number 65-0622036
				Applied For <input type="checkbox"/> Not Applicable
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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	2	3	4	
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip	
CEO, Secy., Director	<u>Peter Sulick</u>	3295 Fort Charles Drive	Naples, FL 34102	
President, Treasurer, Asst. Secy., Director	<u>C. Meade Sutterfield</u>	3295 Fort Charles Drive	Naples, FL 34102	
			400002936504--2	
8. Name and Address of Current Registered Agent The Prentice-Hall Corporation System, Inc. 1201 Hayes 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 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 <u><i>Judith K. Collins</i></u> Date 7-19-99 REGISTERED AGENT MUST SIGN				
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (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: <u><i>Peter Sulick</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Peter Sulick, CEO & Secretary (941) 261-0295 Date Daytime Phone #		

CP2E081 (12/98)



**THE UNITED STATES
CORPORATION
COMPANY**

ACCOUNT NO. : 072100000032

REFERENCE : 311363 4320788

AUTHORIZATION :

COST LIMIT : \$ 900.00

Patricia Pizut

ORDER DATE : July 19, 1999

ORDER TIME : 11:52 AM

ORDER NO. : 311363-005

CUSTOMER NO: 4320788

CUSTOMER: Eleanor Horsley, Legal Asst
LATHAM & WATKINS
LATHAM & WATKINS
1001 Pennsylvania Avenue, N.w.
Suite 1300
Washington, DC 20004

DOMESTIC FILING

NAME: SSPCS CORPORATION

EFFECTIVE DATE:

XX CERTIFICATE OF REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

RECEIVED
JUL 20 11:52:59

CONTACT PERSON: Tamara Odom

EXAMINER'S INITIALS: _____