

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JAN 30 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F96000001323**

1. Corporation Name

OFFICE DETAILS INC.

Principal Place of Business

25 OTTAWA S.W.
ARENA STATION
GRAND RAPIDS MI 49503
US

Mailing Address

901 44TH ST. S.E.
P.O. BOX 1967 (TAX DEPT)
GRAND RAPIDS MI 49501
US

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

03/14/1996

5. FEI Number

38-3254746

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)

000011195896

01/29/03--01105--006 **908.75
City / State / Zip

Title(s)

Name of Officers
and/or Directors

Street Address of Each
Officer and/or Director

GRAND RAPIDS MI 49503

SVP

KLIPA, EDMUND

25 OTTAWA S.W.

T

KEANE, JAMES
Keane

901 44TH STREET

GRAND RAPIDS MI 49508

S

BOTSFORD, JON D

901 44TH STREET SE

GRAND RAPIDS MI 49508

VP

JENNINGS, TERESA

26 OTTAWA S.W.

GRAND RAPIDS MI 49503

VP

RICHTER, JOHN

25 OTTAWA S.W.

GRAND RAPIDS MI 49503

AS

KETTERER, EDWARD

904 49TH STREET S.E.

GRAND RAPIDS MI 49508

See attached for a complete list.

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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. or 617.0505, F.S.

Signature of
Registered Agent

Claudia L. Saari
REGISTERED AGENT MUST SIGN

Claudia L. Saari
Asst. Secretary

Date

1/17/03

11. 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

Date

1/21/03

Daytime Phone #

CR2E040 (8/02)

Officers of Office Details Inc.

<u>Name</u>	<u>Office</u>	<u>Address</u>
Edmund Klipa	President	25 Ottawa SW Grand Rapids, MI 49503
Marvin Frackt	SVP Business & Sales Development	3131 McKinney Avenue, Suite 300 Dallas, TX 75204
John Richter	VP, Marketing, Design and Product Development	25 Ottawa SW Grand Rapids, MI 49503
Teresa Jennings	VP Business Operations	25 Ottawa SW Grand Rapids, MI 49503
Jon D. Botsford	Secretary	901 44th Street SE Grand Rapids, MI 49508
James P. Keane	Treasurer	901 44th Street SE Grand Rapids, MI 49508
Sheila C. Dayton	Assistant Secretary	901 44th Street SE Grand Rapids, MI 49508
Carl Smith	General Manager Technology Products	4888 S. Old Peachtree Road Norcross, GA 30071

Directors of Office Details Inc.

Edmund Klipa	25 Ottawa SW Grand Rapids, MI 49503
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