

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

00 JAN 28 AM 9:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **F96000005556**

1. Corporation Name

PST Vans, Inc.

Principal Place of Business

Mailing Address

See below

See below

**REINSTATEMENT** **98-00**

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

2. New Principal Office Address, if Applicable  
4080 Jenkins Road

3. New Mailing Office Address, if Applicable  
4080 Jenkins Road

4. Date Incorporated or Qualified  
To Do Business in Florida

October 24, 1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Chattanooga, Tennessee

City & State

Chattanooga, Tennessee

Zip

37421

Country

United States

Zip

37421

Country

United States

5. FEI Number

87-0411704

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ ~~STATE~~ ~~UNITED STATES~~

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P/D	Patrick E. Quinn	4080 Jenkins Road	Chattanooga, Tennessee 37421
V/S/D	Max L. Fuller	4080 Jenkins Road	Chattanooga, Tennessee 37421
S	Ray M. Harlin	4080 Jenkins Road	Chattanooga, Tennessee 37421

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\*\*\*1058.75 \*\*\*1058.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

CT-Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

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

*Mary R. Adams*  
REGISTERED AGENT MUST SIGN

Date 1/24/00

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

Patrick E. Quinn, President

January 20, 2000

(423) 510-3000

Date

Daytime Phone #

W99000027667