

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000006726

1. Corporation Name
DIGIPH PCS, INC.

Principal Place of Business
PO BOX 332
MILLRY AL 36558

Mailing Address
PO BOX 332
MILLRY AL 36558

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

2. New Principal Office Address, If Applicable
851 South Belt Line Hwy
Suite, Apt. #, etc.
804 (Suite)
City & State
Mobile AL
Zip
36606 Country
USA

3. New Mailing Office Address, If Applicable
851 South Belt Line Hwy
Suite, Apt. #, etc.
Ste 804
City & State
Mobile, AL
Zip
36606 Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida 12/23/1996

5. FEI Number 63-1146454

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
PDC	WILLIAMS, EDD JR	MILLRY TELEPHONE BLDG., HWY 17 N	MILLRY AL 36558
V	BROWN, PAUL	MILLRY TELEPHONE BLDG., HWY 17 N	MILLRY AL 36558
STD	MACKEY, ROBERT L	100 W. LAUREL AVE.	FOLEY AL 36536
DC	YOUNCE, DALE	100 W. LAUREL AVE.	FOLEY AL 36536
D	KAISER, DENNIS	100 W. LAUREL AVE.	FOLEY AL 36536

REINSTATEMENT 1997

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
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.

Signature of Registered Agent
Date
REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid 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: EDD WILLIAMS JR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11.347 (334) 450-2500
Date Daytime Phone #

CREC040 (8/97)

FORMED
AND
FILED
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1997 NOV -4 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



pg. 2 of 2

Annual Report
FOR
RENEWAL

Sandra B. Northam
Secretary of State

DOCUMENT # **F96000006726**

DIGIPH PCS, INC.

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MILLRY AL 36558

Mailing Address
PO BOX 332
MILLRY AL 36558



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~~851 South Belt Line Hwy~~
~~804 (Suite)~~
~~Mobile AL~~
~~36606~~
Country ~~USA~~

3. New Mailing Office Address, If Applicable
~~851 South Beltline Hwy~~
~~Suite, Apt. #, etc.~~
~~Ste 804~~
~~City & State~~
~~Mobile, AL~~
~~Zip~~
~~36606~~
Country ~~USA~~

4. Date incorporated or Qualified To Do Business in Florida **12/23/1996**
5. FEI Number **63-1146454**
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	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
PDC	WILLIAMS, EDD JR	MILLRY TELEPHONE BLDG., HWY 17 N 851 So. Beltline Hwy Ste 804 Mobile, AL 36606	MILLRY AL 36558 Mobile, AL 36606
V	BROWN, PAUL	MILLRY TELEPHONE BLDG., HWY 17 N	MILLRY AL 36558
STD	MACKAY, ROBERT L	100 W. LAUREL AVE.	FOLEY AL 36536
DC	YOUNCE, DALE	100 W. LAUREL AVE.	FOLEY AL 36536
D	KAISER, DENNIS	100 W. LAUREL AVE.	FOLEY AL 36536

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 and Address

Suite, Apt. #, etc.

City State Zip
FL

I, the undersigned, being a resident of the State of Florida, am familiar with and accept the obligations of Section 865, F.S.

Signature of Registered Agent **X Dale Morris**
REGISTERED AGENT MUST SIGN

Date **11.5.97**

11. This corporation owes or has paid the current year
franchise Personal Property tax due June 30. Yes ☐ No ☒

For other use for return of
franchise fee

12. I, the undersigned, being a resident of the State of Florida, am familiar with and accept the obligations of Section 865, F.S. I hereby certify that the information furnished herein is true and correct to the best of my knowledge and belief, and that the corporate name satisfies the requirements of Section 865, F.S. The information furnished herein is true and correct to the best of my knowledge and belief, and that the corporate name satisfies the requirements of Section 865, F.S. The information furnished herein is true and correct to the best of my knowledge and belief, and that the corporate name satisfies the requirements of Section 865, F.S.

SIGNATURE: **Edd Williams**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Edd Williams
11.3.97

11.3.97 (334) 450-2500
Date Daytime Phone