

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

APPROVED  
AND  
FILED

00 NOV 20 PM 3:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F97000001308

1. Corporation Name

SYSTEM TECHNOLOGY ASSOCIATES, INC.

Principal Place of Business

4040 EAST BIJOU STREET  
ATTN: ACCOUNTS PAYABLE  
COLORADO SPRINGS CO 80909

Mailing Address

4040 EAST BIJOU STREET  
ATTN: NEDRA ENGELSON  
COLORADO SPRINGS CO 80909

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

03/14/1997

5. FEI Number

84-1074887

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ A

\$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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
DCP COO	BEN, ROBERT -- Olesen, Ray	1545 HATHAWAY DR 8484 Westpark Dr., Suite 630	COLORADO SPRINGS CO 80915 McLean, Virginia 22102
S- CEO, P	BEN, PATRICIA L Culver, Dr. Walter	1545 HATHAWAY DR 8484 Westpark Dr., Suite 630	COLORADO SPRINGS CO 80915 McLean, Virginia 22102
V- S	KELLEY, JAY W- Karish, David	3160 CATHEDRAL SPIRE 8484 Westpark Dr., Suite 630	COLORADO SPRINGS CO 80904 McLean, Virginia 22102
V- FVP	SANFORD, ROBERT J	6515 HASTINGS DR	COLORADO SPRINGS CO 80919
V	ENGELSON, NEDRA	5270 LADERA LN	COLORADO SPRINGS CO 80917
V	HUFFMAN, RUSSELL J	1350 WINDING RIDGE TERR	COLORADO SPRINGS CO 80919

8. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

9. Name and Address of New Registered Agent

Name

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

Suite

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

*Laura R. Dunlap*

Laura R. Dunlap  
as its agent

Date 11-20-00

REGISTERED AGENT MUST SIGN

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:

*Nedra Engelson*  
Nedra Engelson  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/18/00 (719) 637-0500, ext 1404

Date

Daytime Phone #

CR2E040 (8/00)