PLEASE READ ALL INSTRUCTIONS BEFORE CO						ING THIS FORM.		
APPLICATION FOR REINSTATEMENT FOR Syndra B., Mortham Secretary of State DIVISION OF CORPORATIONS					FILED			
DOCUMENT # F9700003198					98 DEC 18 PM 1:42			
1. Corporation Name					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
PLANTMAN CORP.					Ì	MLEMIMOULLY		
1000 EAST 80TH PLACE 1000 EAST 8UITE 700 NORTH SUITE 70			Address WHITE CO AST BOTH PLACE 700 NORTH LLVILLE IN 46410					
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					4. Date Incorporated or Qualified			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			To Do Business in Florida 06/18/1997			
City & State	•	City & State			5. FEI Number 35-2017 825 Applied For Not Applicable			
Zip	Country	Žip	Co	untry	6. CERTIFICATE		dditional Fee required Certificate of Status	
7. Names a	and Street Addresses of Each Officer and/o	or Director (Flo	rida nonprofit cor	'			<u> </u>	
Title(s)	Name of Officers and/or Directors 3 (Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)		City / State / Zip		
VSD				OTH PLACE, STE 70	700 NO MERRILLVILLE IN			
Р	BURNELL, LAWRENCE E 100			1000 EAST 80TH PLACE, STE 700 NO		MERRILLVILLE IN		
					71	700002722267-1 -12/24/98-01083-008 *****150.00 ****150.00		
				- 				
	8. Name and Address of Current R	egistered Age	ent		9. Name and A	Address of New Registered Ager	nt .	
Name					(88)			
☐ T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Add Street Add					ss (P.O. Box Number is Not Acceptable)			
PLANTATION FL 33324				Suite, Apt. #, Etc.	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 REQUIRED REGISTERED AGENT MUST SIGN Date 12/16/98								
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No								
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:								
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR								

(2)

November 18, 1998

Division of Corporations Annual Report / Statement Sections 409 East Gaines Street Tallahassee, FL 32399

Dear Sirs or Madam:

We recently received notice of administrative dissolution as a result of a failure to file an annual report. A call to your office indicated that the 2 notices to file the annual report that you sent were returned to you as undeliverable. As the notice of administrative dissolution was received, we can only assume that the U.S. Post Office erred in their failure to properly deliver the annual report request to us. As our failure to file timely is a result of the U.S. Post Office's failure to deliver the forms to us, we respectfully request that you waive the \$600 reinstatement fee. Enclosed please find a check in the amount of \$150.00 representing our annual report filing fees.

Should you require any further information, don't hesitate to contact me

Very truly yours,

James E Burell

Lawrence E. Burnell

President

LEB/kd

Enclosure: Check

PLANTMAN CORP.