	PLEASE READ A	L INSTRU	CTIONS BEFOR	RE CO	OMPLETING TI	IS FORM.		
APPLICATION FOR REINSTATEMENT  DOCUMENT # F9000004176		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Division of corporations			OO JAN 14 PM 12: 47  SECRETARY OF STATE TALLAMASSEE. FLORIDA			
Principal Place of Business P.O. Box 220, Route 2 North Stonington, CT 06359  If above addresses are incorrect in any way line through 2. New Principal Office Address, if Applicable 3. Suite, Apt. #, etc.  City & State		Mailing Address P.O. Box 229, Route 2 North Stonington, CT 06359 th incorrect information and enter correction below. 3. New Mailing Address, If Applicable Suite, Apt. #, etc.		T w.	-01/20/0001027008 *****308.75 *****908.75  *****308.75 *****908.75  *****908.75  *****908.75  *****908.75  *****908.75  *****908.75  *****908.75  *****908.75  *****908.75  *****908.75  *****908.75  *****908.75  *****908.75  ******908.75  ******908.75  ******908.75  ******908.75  ******908.75  ******908.75  ******908.75  ******908.75  *******908.75  ******908.75  ******908.75  *******908.75  ***********************************			
Zip Country		Zip	Zip Country		6. CERTIFICATE OF STATUS DESIRED 1			
Title(s)	Street Addresses of Each Officer Name of Office and/or Directo	ers and	Street /	vaaress (	ot each		/State/Zip	
D D	Gary P. Bennett		86 Montauk Avenue			N. Stonington, CT 06359		
s/D	David M. Nolf		347 Lantern Hill Rd.		Mystic,	Mystic, CT 06355		
D/P	John A. Robic		11901 Plantation Drive		Great Fa 22066	Great Falls, VA 22066		
VP#COC	Robert Weatherwax	11427 Nightstar Way			Reston, VA. 22094			
VP/CFO	John T. McCoy	105 Palomino Circle		Butler, F	A 16001			
D	Jay W. Ryerson		24 Puttker Ro	24 Puttker Road N. Stonington, CT 06			gton, CT 0635	
	8. Name and Address of Cum	ent Registered Ag			9. Name and Add	ress of New Regis	tered Agent	
C T Corporation System 1200 South Pine Island Road Plantation, Florida 33324			Street Address (P.O. Box Number Suite, Apt. #, Etc.		r is Not Acceptable)			
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 SECIAL ASSISTABLE SECONTAGE Date  REGISTERED AGENT MUST SIGN								
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No x (See other side for information on intangible tax.)								
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3) (k). Floride Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that it am an officer or director or the receiver or trustes 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., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.    **David M. Noif***   1/7/00 (860) 599-3910								

Attachment **Z** 

Active Media Solutions Corp. Names & addresses of directors and officers 1/00

<u>Name</u>	<u>Title</u>	Business Address
John G. Drugo	VP	3221 Cambridge Drive Murrysville, PA 15668
David R. Fall	VP	14777 Baltusrol Drive Orlando, FL 32828
David J. Fabianski	VP	117 Castle Hill Road Pawcatuck, CT 06379
Kevin S. Krom	VP	13522 Wisteria Way Fairfax, VA 22033
Gretchen Porkert	VP	1901 Poole Lane McLean, VA 22101

## Legend

VP- Vice President