

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 FEB -9 AM 8:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97000005324

1. Corporation Name

SUBURBAN MANAGEMENT, INC.

2. Principal Office Address

300 GALLERIA PKWY

Suite, Apt. #, etc.

SUITE 1200

City & State

ATLANTA GA

Zip

30339

Country

USA

3. Mailing Office Address

300 GALLERIA PKWY

Suite, Apt. #, etc.

SUITE 1200

City & State

ATLANTA, GA

Zip

30339

Country

USA

REINSTATEMENT 03-04

4. Date Incorporated or Qualified
To Do Business in Florida

10/09/1997

5. FEI Number

58-1847799

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

C T 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

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

Allan Farnell, Vice President

Date 10/28/2003

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CEO	VICKERS, DAVID	300 GALLERIA PKWY, #1200	ATLANTA GA 30339
COO	CHERYL VICKERS	300 GALLERIA PKWY #1200	ATLANTA GA 30339
CFO	BREWER, BILL	300 GALLERIA PKWY #1200	ATLANTA GA 30339

10. 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:

Bill R. Brewer, CFO

2-2-04

770-799-5000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



300 Galleria Parkway Suite 1200 Atlanta, Georgia 30339 (770) 799-5168 Fax
(770) 951-0553

February 2, 2004

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Suburban Management, Inc. – F97000005324

Reinstatement Official,

Due to a change in our registered agent and acquiring of this company, the renewal registration form for 2003 was not received by our company. We are therefore requesting the reinstatement fee be waived and our company returned to an active status for the 2003 and 2004 periods.

A check in the amount of \$ 300.00 is enclosed for the 2003 and 2004 annual renewals.

Thank you for you help and cooperation.

A handwritten signature in black ink, appearing to read 'Bill Brewer', written over a horizontal line.

Bill Brewer
CFO
Suburban Management, Inc.