

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 # F97000006858

1. Corporation Name

Boies & Associates, P.C.

Principal Place of Business

80 Business Park Dr.
Ste. 110
Armonk, NY 10504

Mailing Address

390 N. Orange Ave.
Ste. 1890
Orlando, FL 32801

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/24/97

5. FEI Number

52-2058168

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
D,P	David Boies, II	2 Middle Patent Road	Armonk, NY 10504
S	Vincent Andrews	16 West Avenue	Darien, CT 06820
			000002783900--0 -12/09/98--01051--003 *****35.00 *****35.00
			000002783900--0 -02/23/99--01021--002 *****865.00 *****865.00

8. Name and Address of Current Registered Agent

Karen C. Dyer
200 East Robinson St., #325
Orlando, FL 32801

9. Name and Address of New Registered Agent

Name
Karen C. Dyer
Street Address (P.O. Box Number is Not Acceptable)
390 North Orange Avenue
Suite, Apt. #, Etc.
#1890
City
Orlando
State
FL
Zip Code
32801

10. I, being appointed the registered agent for the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

[Signature]

Date

2/14/99

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]

2/10/99

Date

914/273-9800

Daytime Phone #