

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Pg. 1 of 2

**CORPORATION
REINSTATEMENT**



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

00 JUL 24 AM 10:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F9800000095**

1. Corporation Name

ISDC, Inc.

2. Principal Office Address

440 Interstate North Pkwy

Suite, Apt. #, etc.

City & State

Atlanta, GA

Zip

30339

Country

3. Mailing Office Address

440 Interstate North Pkwy

Suite, Apt. #, etc.

City & State

Atlanta, GA

Zip

30339

Country

4. Date Incorporated or Qualified
To Do Business in Florida

1/7/98

5. FEI Number

52-2060162

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

CT 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

Dale H. Morris

DALE H. MORRIS
ASSISTANT VICE PRESIDENT

Date **07/18/00**

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

See Attached

REINSTATEMENT

9708
[Signature]

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CFO

7/21/00

Date

720-763-5620

Daytime Phone #

CR2E081 (9/99)

ISDC, INC.

Directors

Stephen F. Johnston, Sr.

**550 River Valley Road
Atlanta, GA 30328**

Michael W. Riley

**575 Meadows Creek Drive
Alpharetta, GA 30202**

William J. Loughman

**Executive Vice President, Chief Financial Officer, Secretary & Treasurer
1740 Kingsley Ct.
Lawrenceville, GA 30043**

Corporate Officers

Stephen F. Johnston, Sr.

**Chairman and Chief Executive Officer
Address above**

Michael W. Riley

**President
Address above**

William J. Loughman

**Chief Financial Officer, Secretary & Treasurer
1740 Kingsley Ct.
Lawrenceville, GA 30043**