

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF STATE
	Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

FILED

99 OCT 26 PM 1:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

F98 000002421

1. Corporation Name

Vac-Con Services, Inc.

Principal Place of Business
969 Hall Park Drive

Mailing Address
2345 Waukegan Road
Suite S-200
Bannockburn, IL 60015

Green Cove Springs, FL 32043

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 99

2. New Principal Office Address, if Applicable	3. New Mailing Office Address, if Applicable	4. Date Incorporated or Qualified To Do Business in Florida	5. Applied For
Suite, Apt. #, etc.	Suite, Apt. #, etc.	3/30/98	SP
City & State	City & State	6. FEI Number	Not Applicable
Zip	Country	36-4221763	
		6. CERTIFICATE OF STATUS DESIRED ☐	

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

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
	See Attached Schedule		

500003026835--B
10/27/99--01082--024
****750.00 ****750.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

Name
Street Address (P.O. Box Number is Not Acceptable)
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 James M. Heflin Date 10/25/99
REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year No Tax Due (See other side for information on intangible tax.)
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 name 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

John P. Corlino
John P. Corlino, Secretary

10/22/99 8471440-3958
Date Daytime Phone #

VAC-CON Services, Inc.
1998 - 1999
OFFICERS & DIRECTORS LIST

TERM EXPIRATION: (Annual Meeting Date: 3rd Monday in April)

NAME & S.S.#

BUSINESS ADDRESS

OFFICERS:

Darrell LeSage, President
351-44-6738

969 Hall Park Drive
Green Cove Springs, FL 56370

D. H. Carroll, Vice President
350-30-7070

2345 N. Waukegan Rd. Ste. S-200
Bannockburn, IL 60015

Joseph S. Haas, V. P. & Treasurer
332-44-5310

2345 N. Waukegan Rd. Ste. S-200
Bannockburn, IL 60045

John P. Corvino, Secretary
320-52-4720

2345 N. Waukegan Rd. Ste. S-200
Bannockburn, IL 60015

Julie Walker, Asst. Secretary
323-54-3045

969 Hall Park Drive
Green Cove Springs, FL 56370

Richard F. Mabery, Controller & Asst. Treasurer
363-44-2716

969 Hall Park Drive
Green Cove Springs, FL 56370

DIRECTORS:

D. H. Carroll
See above

See above

Joseph S. Haas
See above

See above