

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10F2

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

00 OCT 24 AM 10:20

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # F98000005531

1. Corporation Name

APEX SITE MANAGEMENT, INC.

Principal Place of Business

555 NORTH LANE, STE 6138  
CONSHOHOCKEN PA 19428

Mailing Address

555 NORTH LANE, STE 6138  
CONSHOHOCKEN PA 19428

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

60

4. Date Incorporated or Qualified  
To Do Business in Florida

10/02/1998

5. FEI Number

23-2953561

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
<del>GEO</del>	<del>GELMAN, ALEXANDER L</del> <i>See attached.</i>	<del>555 NORTH LANE, STE 6138</del>	<del>CONSHOHOCKEN PA</del>
<del>P</del>	<del>CANZI, MARC C</del>	<del>555 NORTH LANE, STE 6138</del>	<del>CONSHOHOCKEN PA</del>
<del>G</del>	<del>GINSBERG, JEFFREY E</del>	<del>555 NORTH LANE, STE 6138</del>	<del>CONSHOHOCKEN PA</del>
<del>D V</del>	<del>LONG, BENJAMIN</del>	<del>555 NORTH LANE, STE 6138</del>	<del>CONSHOHOCKEN PA</del>
<del>V</del>	<del>STERN, RICHARD B</del>	<del>555 NORTH LANE, STE 6138</del>	<del>CONSHOHOCKEN PA</del>
<del>V</del>	<del>RENZONI, MARTIN L</del>	<del>555 NORTH LANE, STE 6138</del>	<del>CONSHOHOCKEN PA</del>

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

900003459339--3

-11/09/00--01038--012

\*\*\*750.00 FL \*\*\*750.00

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

*Barbara A. Burke*

BARBARA A. BURKE

Date

10-18-00

REGISTERED AGENT MUST SIGN

SPECIAL ASSISTANT SECRETARY

11. 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

Date

Daytime Phone #

10-19-00 605-3100

2082

**APEX SITE MANAGEMENT, INC.**

*Attachment*  
*F98000006531*

Director: Stephen H. Clark  
SpectraSite Communications, Inc.  
100 Regency Forest Drive, Suite 400  
Cary, NC 27511

President: Dale A. Carey  
SpectraSite Communications, Inc.  
100 Regency Forest Drive, Suite 400  
Cary, NC 27511

Vice President:  
Daniel I. Hunt  
SpectraSite Communications, Inc.  
100 Regency Forest Drive, Suite 400  
Cary, NC 27511

Secretary: John H. Lynch  
SpectraSite Communications, Inc.  
100 Regency Forest Drive, Suite 400  
Cary, NC 27511