

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION  
REINSTATEMENT**



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

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **F99000001486**

1. Corporation Name

COMPTON AMHERST SYSTEMS, INC.

500004694825--8  
-11/27/01--01038--008  
\*\*\*\*300.00 \*\*\*\*300.00

2. Principal Office Address

1840 Century Park East

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Los Angeles, California

City & State

Zip

90067

Country

USA

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

3/18/99

5. FEI Number

16-1563774

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

33324-5500

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

*Connie Bryan*  
REGISTERED AGENT MUST SIGN

Date 11-15-01

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 EXHIBIT A Attached Hereto		

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)(b), 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 A. Mulligan, Secretary*

Date

11/15/01

310-201-3081

Daytime Phone #

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EXHIBIT A  
TO CORPORATION REINSTATEMENT  
COMPTek AMHERST SYSTEMS, INC.  
FLORIDA DEPARTMENT OF STATE

Item 9. - continued:

Address for all Directors and Officers: 1840 Century Park East  
Los Angeles, California 90067

**Directors:**

Albert F. Myers  
Gary W. McKenzie  
Joe Rounkles

**Officers:**

Albert F. Myers	Chairman
Edward G. Eberl	President
Don Hess	Vice President
Bob Cockrell	Vice President
William Romans	Vice President
Susan Maas	Vice President
Larry Probst	Vice President
Gary W. McKenzie	Vice President
Albert F. Myers	Treasurer
John H. Mullan	Secretary
Kathleen M. Salmas	Assistant Secretary
David H. Strode	Assistant Treasurer
Lloyd H. Straits	Assistant Treasurer