

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 NOV -4 AM 11:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F99000001584

1. Corporation Name

PHONE-LINK, INC.

Principal Place of Business

Mailing Address

230 YAGER AVENUE, SUITE 3  
LAGRANGE KY 40031

230 YAGER AVENUE, SUITE 3  
LAGRANGE KY 40031

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

03/25/1999

5. FEI Number

31-1562677

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	LANDGRAF, DENNIS	<del>230 YAGER AVENUE, SUITE 3</del> 1700 EASTPOINT PRWY	<del>LAGRANGE KY 40031</del> LOUISVILLE KY 40223
ST	SANTA CRUZ, SANTIAGO	<del>230 YAGER AVENUE, SUITE 3</del> 1700 EASTPOINT PRWY	<del>LAGRANGE KY 40031</del> LOUISVILLE KY 40223
VP	LEE, ANNETTE	<del>230 YAGER AVENUE, SUITE 3</del> 1700 EASTPOINT PRWY	<del>LAGRANGE KY 40031</del> LOUISVILLE KY 40223
P	HANSEN, MIKE	<del>230 YAGER AVENUE, SUITE 3</del> 1700 EASTPOINT PRWY	<del>LAGRANGE KY 40031</del> LOUISVILLE KY 40223
D	SIWEK, STAN	<del>230 YAGER AVE, STE 3</del> 1700 EASTPOINT PRWY	<del>LAGRANGE KY 40031</del> LOUISVILLE KY 40223

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SIWEK, STANLEY P

% NORTH AMERICAN LENDING

~~2284 N. CITRUS BLVD. #108~~

LEESBURG FL ~~34748~~ 34748

Name

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

Suite, Apt. #, Etc.

City

State

FL

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. or 617.0505, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10/29/03

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:

Stanley P. Siwek

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/31/03

Date

502-254-8500

Daytime Phone #

CR20040 (7/03)



1700 Eastpoint Pkwy • Suite 270 • Louisville, KY 40223 • Telephone (800)-220-1377 • Fax (800)-220-7382

October 31, 2003

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: **Request for Waiver of Reinstatement Fee – UBR 2003 Annual Report**  
**FEI Number – 31-1562677 - PhoneLink, Inc**

Dear Sir or Madam:

Please find enclosed the Application for Reinstatement (Doc. # F990000001584) for the above named PhoneLink, Inc. Also enclosed you will find a check in the amount of \$150.00, which represents the annual fee.

In addition, we are requesting that any and all penalties and/or reinstatement fees be waived due to the fact that we received no notifications, reminders, reporting forms or other correspondence regarding the UBR for 2003 until we recently received the Notice of Administrative Dissolution or Revocation. In view of the lack of notifications, we feel that a waiver of such fees is in order.

Thank you for your attention to this matter. We anticipate that the UBR forms will be submitted to us on a timely basis in the years to come in order to avoid another unfortunate situation such as this.

Sincerely,

A handwritten signature in cursive script, appearing to read "Mike Hansen".

Mike Hansen  
President

MH/csl

Enclosures