

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



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

FILED

00 NOV 16 PM 2: 08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F99000004274**

1. Corporation Name

R.S. ANDREWS OF FLORIDA, INC.

Principal Place of Business

**3510 DEKALB TECHNOLOGY PARKWAY
ATLANTA GA 30340**

Mailing Address

**3510 DEKALB TECHNOLOGY PARKWAY
ATLANTA GA 30340**



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

2. New Principal Office Address, If Applicable
3102 S.E. Jay Street

Suite, Apt. #, etc.

City & State
Stuart, FL

Zip
34997

Country
USA

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

08/24/00 90074 004 \$550.00

4. Date Incorporated or Qualified
To Do Business in Florida

08/18/1999

5. FEI Number **58-2485842**
APPLIED FOR

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
DCEO	ANDREWS, R. STEPHEN	3510 DEKALB TECHNOLOGY PARKWAY	ATLANTA GA 30340
CD	DESTAFANO, JOHN J	3510 DEKALB TECHNOLOGY PARKWAY	ATLANTA GA 30340
ST	SMELAS, C. ROBERT	3510 DEKALB TECHNOLOGY PARKWAY	ATLANTA GA 30340
SCLO	Tramonte, James A.	3510 DeKalb Technology Pkwy	Atlanta, GA 30340
TCFO	Kazmier, Richard R.	3510 DeKalb Technology Pkwy	Atlanta, GA 30340
COO	Hamilton, James J.	3510 DeKalb Technology Pkwy	Atlanta, GA 30340

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

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.

Signature of
Registered Agent

SIGNATURE REQUIRED
Jennifer F. Andrews

Date **11/8/00**

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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-10-00 770-454-1820 X
Date Daytime Phone #

2224



HOME WARRANTIES
AIR CONDITIONING • HEATING • PLUMBING • ELECTRICAL
APPLIANCES • WINDOW REPLACEMENTS • TERMITE & PEST CONTROL

202

November 10, 2000

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

RE: R.S. Andrews of Florida, Inc.
F99000004274

Dear Clerk:

Enclosed is the Application for Reinstatement of R.S. Andrews of Florida, Inc. In a conversation with your office yesterday, I was told that the Annual Report was timely received in your office but returned requesting the FEIN number for said corporation. Unfortunately, that request was never received here.

Our check in the amount of \$550.00, which represents the annual reporting fee, has cleared our bank and, therefore, I am respectfully requesting that you waive the late fees charged with a reinstatement.

Thank you in advance for your assistance with this matter.

Sincerely,

James A. Tramonte, Esq.
Chief Legal Officer/Secretary

JAT/jbs