

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

98 NOV 23 AM 10:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

DOCUMENT # G17283

1. Corporation Name

SUN TITLE COMPANY, INC.

Principal Place of Business

Mailing Address

1100 HOMESTEAD RD. N.
% HARRY C. POWELL, JR.
LEHIGH FL 33936
US

1100 HOMESTEAD RD. N.
% HARRY C. POWELL, JR.
LEHIGH FL 33936
US

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

01/03/1983

5. FEI Number

59-2249154

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PTD	POWELL, HARRY C., JR.	1100 HOMESTEAD RD. N.	LEHIGH FL
SD	ANGLICKIS, RUTH A.	1100 HOMESTEAD RD. N.	LEHIGH FL

000002701400--0
-12/03/98--01042--004
***165.00 ***165.00

11/25

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

POWELL, HARRY C., JR.
1100 HOMESTEAD RD. N.
LEHIGH FL 33936

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
REGISTERED AGENT MUST SIGN

Date

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☐

(See other side for information
on intangible tax.)

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 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

Date

Daytime Phone #

CR2E040 (9/90)

Sun Title Company Inc.

November 16, 1998

To: Florida Department of State, Division of Corporations,
Reinstatements

From: Sun Title Company, Inc.

Re: Notice of Administrative Dissolution or Revocation

Dear Sirs:

Enclosed you will find a copy of our Second Notice, a check and a letter that were mailed on or about August 3, 1998. This was done in response to your office having never received the First Notice or check. We do not have a copy of the First Notice but the check number issued was 6559 cut on March 5, 1998.

On Thursday November 12, 1998 we received the enclosed Notice of Administrative Dissolution or Revocation. Upon calling your office we were instructed to mail in this newest form with a check and letter explaining all this, "return receipt requested".

Your anticipated consideration in this matter is greatly appreciated.

/

Sincerely yours,



Harry C. Powell, Jr.
President