

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 MAY -7 PM 4:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 432769

1. Corporation Name

Facility Management Corporation of  
Pensacola

REINSTATEMENT 01-03

200018466312  
05/07/03--01097--015 \*\*1058.75

2. Principal Office Address

701 Market Street

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4th Floor

City & State

Philadelphia, PA

City & State

Zip

Country

Zip

Country

19106

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

12/4/84

5. FEI Number

13-3245048

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

The Prentice Hall Corporation System

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

1201 N. Hay Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

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

Brian Courtney

Asst. V. Pres.

Date

5/6/2003

REGISTERED AGENT MUST SIGN

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
P/C	Wes Westley	701 Market St.,	Phila., PA 19106
V	Maureen Ginty	701 Market St.	Phila., PA 19106
V	Glenn Mon	701 Market St.	Phila., PA 19106
V	Thom Connors	701 Market St.	Phila., PA 19106
S/T	John Burns	701 Market St.	Phila., PA 19106

\*See Attached Directors List

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)(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

5-1-03

Date

215-592-6681

Daytime Phone #

CR2E081 (10/02)

# DIRECTORS

**NAME**

**ADDRESS**

Fred Sutherland

ARAMARK  
1101 Market Street, 31<sup>st</sup> Floor  
Philadelphia, PA 19107

Richard Schulze

Hyatt Hotels Corporation  
200 West Madison Street, 31<sup>st</sup> Floor  
Chicago, IL 60606

Wes Westley

707 Kyle Lane  
Lower Gwynedd, PA 19002