

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 MAY 14 PM 12:18

DOCUMENT # H96250

1. Corporation Name

Tmesys, Inc.

2. Principal Office Address

175 Kelsey Lane

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33619

Country

3. Mailing Office Address

P.O. Box 959

Suite, Apt. #, etc.

City & State

Valley Forge, PA

Zip

19482

Country

Chester

REINSTATEMENT 03-04

700037026887

05/24/04--01017--020 \*\*300.00

4. Date Incorporated or Qualified  
To Do Business in Florida

01/21/1986

5. FEI Number

59-3143128

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

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

*Margaret E. Routzahn*

MARGARET E. ROUTZAHN

Special Assistant Secretary

Date

5/13/04

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
	See Exhibit A		

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:

*John Scheels*

John Scheels, Vice President

May 3, 2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**Tmesys, Inc.**  
**Exhibit A**

**Directors**

**William G. Shields – 175 Kelsey Lane, Tampa, Florida 33619**

**David A. Weidner - 175 Kelsey Lane, Tampa, Florida 33619**

**Officers**

**David Weidner, President & Chief Financial Officer**  
**175 Kelsey Lane, Tampa, Florida 33619**

**William G. Shields, Senior Vice President**  
**175 Kelsey Lane, Tampa, Florida 33619**

**John Scheels, Vice President, General Counsel & Assistant Secretary**  
**175 Kelsey Lane, Tampa, Florida 33619**

**William D. Sprague, Senior Vice President & Secretary**  
**1300 Morris Drive, Chesterbrook, PA 19087-5594**

**Daniel T. Hirst, Assistant Secretary**  
**1300 Morris Drive, Chesterbrook, PA 19087-5594**

Tmesys, Inc.  
175 Kelsey Lane  
Tampa, FL 33619

May 12, 2004

Florida Department of State  
Secretary of State  
Division of Corporations

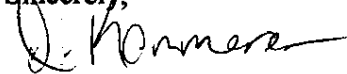
RE: Tmesys, Inc.  
FEIN: 59-3143128

Dear Sir or Madam:

Attached is a completed Reinstatement form for Tmesys, Inc. The company did not received the 2003 or 2004 annual reports in the mail because the state records listed an incorrect mailing address for Tmesys, Inc. A discussion with any associate in your office revealed that the state system has P.O. Box 959, Valley Forge, California listed. The correct mailing address is P.O. Box 959, Valley Forge, PA, 19482.

I respectfully request that you waive the \$600 reinstatement fee. I have attached a \$300 check as payment for the 2003 and 2004 annual reports.

Sincerely,



Diana Kammerer