

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

FILED

99 APR 13 PM 2:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

K79050

1. Corporation Name

Piatt Development Corporation

Principal Place of Business

Mailing Address

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

2. New Principal Office Address, If Applicable
Southpointe Plaza I, Suite 400

3. New Mailing Office Address, If Applicable
Southpointe Plaza I, Suite 400

Suite, Apt. #, etc.
400 Southpointe Boulevard

Suite, Apt. #, etc.
400 Southpointe Boulevard

City & State

City & State

Canonsburg, PA

Canonsburg, PA

Zip
15317

Country

Zip
15317

Country

4. Date Incorporated or Qualified
To Do Business in Florida

4-7-89

5. FEI Number

58-1887645

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
Pres.	Jack B. Piatt	400 Southpointe Blvd., Ste.400	Canonsburg, PA 15317
Vice Pres.	Jack B. Piatt, II	400 Southpointe Blvd., Ste.400	Canonsburg, PA 15317
Vice Pres.	Douglas J. Neil	400 Southpointe Blvd., Ste.400	Canonsburg, PA 15317
Sec. Tres.	Charles D. Boehm	400 Southpointe Blvd., Ste.400	Canonsburg, PA 15317

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

Jack B. Piatt

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

9000 Country Club Drive

Suite, Apt. #, Etc.

City

Port St. Lucie,

State

FL

Zip Code

34986

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.05(5), F.S.

Signature of
Registered Agent

Jack B. Piatt
REGISTERED AGENT MUST SIGN

Date

4-6-99

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jack B. Piatt, President

4-6-99

Date

(724) 743-3400

Daytime Phone #