


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

CORPORATION REINSTATEMENT



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

DOCUMENT # L03600

1. Corporation Name
Safety Centered Solutions, Inc.

300003912783--9
-03/27/01--01091--027
****900.00 ****900.00

300003912783--9
-03/27/01--01091--028
*****8.75 *****8.75

2. Principal Office Address 7650 W. Courtney Campbell Csw		3. Mailing Office Address 7650 W. Courtney Campbell Csw	
Suite, Apt. #, etc. Suite 400		Suite, Apt. #, etc. Suite 400	
City & State Tampa, FL		City & State Tampa, FL	
Zip 33607	Country USA	Zip 33607	Country USA

4. Date Incorporated or Qualified To Do Business in Florida 07/20/89

5. FEI Number 650136711 Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$6.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

Suite, Apt. #, Etc.

City Tallahassee State FL Zip Code 32301

REINSTATEMENT 200001
[Handwritten Signature]

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 *Deborah D. Skipper* REGISTERED AGENT MUST SIGN *Deborah D. Skipper* Asst. Secretary Date *3/23/01*

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
Direct	Lance Anastasio	200 Avenue F, NE	Winter Haven, FL 33880
Direct	William Gole	Five Paragon Drive	Montvale, New Jersey 07645
Direct	Paul Hilger	Five Paragon Drive	Montvale, New Jersey 07645
Direct	David Spencer	7650 W. Courtney Campbell Csw Ste 400	Tampa, FL 33607
Office	Carolyn Spencer	7650 W. Courtney Campbell Csw Ste 400	Tampa, FL 33607
Office	Steven Cunningham	7650 W. Courtney Campbell Csw Ste 400	Tampa, FL 33607

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: *Carolyn M. Spencer* SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date *3/23/01* (813) 626-0299 Daytime Phone #

[Handwritten Signature]