PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hond Secretary of State

DIVISION OF CORPORATIONS -

N9400006282 DOCUMENT

1. Corporation Name

BOOTH SERVICES, INC.

Principal Place of Business

Mailing Address

1424 NE EXPRESSWAY

1424 NE EXPRESSWAY

FILED

03 NOV 17 AH 8:51

SECRETARY OF STATE TALLAHASSEE, FLORIDA



| ATLANTA GA | | | ATLANTA GA | | | | | | | |
|---|-----------------------------------|-----------------------------------|------------|--|---|--|--|--------------------|----------------|--|
| If above addresses are incorrect in any way, line through incorrect information and enter correction below. | | | | | | | REINSTATEMENT 03 | | | |
| | Address, If Applicable | ing Office Address, If Applicable | | | Date Incorporated or Qualified To Do Business in Florida 12/27/1994 | | | | | |
| Suite, Apt. #, etc. Suite, Apt. # | | | | | | | 5. FEI Number Applied For | | | |
| City & State City & State | | | | | | | | 59-3342078 | Not Applicable | |
| Zip* Country Zip* | | | Zip | Country | | | 6. S8.75 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) | Name of Officers and/or Directors | | | Street Address of Each Officer and/or Director | | | | City / State / Zip | | |
| D | GOODIER, WILLIAM | | | 2880 GRAVITT RD | | | | DULUTH GA 30096 | | |
| D | JEFFREY, | 2543 ALPINE WAY | | | | DULUTH GA 30096 | | | | |
| D | HAUPT, GA | 15318 WINDING CIR DR | | | 72 (7) | TAMPA FL 33613 | | | | |
| D | PHILIP'SWYERS | | | | 1424 Northeast Expression | | | 10301133004 **E | 1.25 | |
| P PHILIP-DNEEDHAM, PRESIDENT | | | | 1424 Northoast Expression | | | pression | Atlanta GA 30329 | | |
| D | WARD, AL H | | | 1633 LENOX RD | | | ATLANTA GA 30306 | | | |
| 8. Name and Address of Current Registered Agent - | | | | | | | Name and Address of New Registered Agent | | | |
| FAULKNER, DONALD Street Ac 3101 LAKE ELLEN LN | | | | | | Name | | | | |
| | | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| TAMPA FL 33618 | | | | | - Suite, Apt. #, Etc. | | | | | |
| | | | | | | City | | State 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. or 617.0505, F.S. | | | | | | | | | | |
| Signature of Registered Agent Date 10 24 63 REGISTERED AGENT MUST SIGN | | | | | | | | | | |
| 11. 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.

404-728-6700





THE SALVATION ARMY

USA SOUTHERN TERRITORY • 1424 NORTHEAST EXPRESSWAY • ATLANTA, GA 30329
PHONE (404) 728-1300 • FAX (404) 728-1331

October 15, 2003

Division of Corporations Annual Report/Reinstatement Section P.O. box 6327 Tallahassee, Florida 32314-6327

RE: BOOTH SERVICES INC., A FLORIDA CORPORATION ANNUAL REPORT/ REINSTATEMENT APPLICATION

To whom it may concern:

Enclosed with this letter is the Annual/ Reinstatement Application as well as the Reinstatement fee of \$61.25 made payable to the Florida Department of State.

Please be advised that after speaking with a representative from your office, it was stated that since we did not receive the prior two (2) notices, that we only have to submit the report fee of \$61.25.

Please be advised that in the future all correspondence should be directed to the following address as follows:

Booth Services Inc. C/O The Salvation Army Attention: Lt. Colonel William Goodier 1424 Northeast Expressway Atlanta, GA 30329

Should you have any questions or concerns, please advise us accordingly.

God's Blessings on You!

Sincerely,

Lt. Colonel William R. N. Goodier

SECRETARY BOARD OF DIRECTORS

WRNG: CK ENCLOSURE