

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 JAN -4 PM 3:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

N 97000000215

1. Corporation Name

THE SEMEION CORPORATION

Principal Place of Business

Mailing Address

ITAINES CITY
FL

PO Box 3595
Itaines City FL 33845-3595

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

02/97

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0724075

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/D	RICHARD BLASDELL	527 W. Florida Ave.	Itaines City / FL / 33844
D	KRISTI VALER	5608 BRAMPTON FAIRUS LANE	JACKSONVILLE / FL 32258
D	LUCT THOMAS	1901 UNION ST., # 113	LAFAYETTE / IN 47904
			200002738742--0 -01/12/99--01089--009 ****245.00 ****245.00
			REINSTATEMENT 98
			SL 1-8-99

8. Name and Address of Current Registered Agent

RICHARD BLASDELL
527 W. Florida Ave.
Itaines City FL 33844

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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.

Signature of
Registered Agent

Richard Blasdel

REGISTERED AGENT MUST SIGN

Date

01/04/99

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:

Richard Blasdel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/04/99 (941) 422 692

Date

Daytime Phone #

CR20040 (1/98)