

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

 FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 NOV -7 PM 2:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000063962

1. Corporation Name

STILLWATER MEDIA GROUP, INC.

Principal Place of Business

11266 W. HILLSBOROUGH AVE., #316  
TAMPA FL 33635-9762

Mailing Address

11266 W. HILLSBOROUGH AVE., #316  
TAMPA FL 33635-9762

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

06/27/2001

5. FEI Number

65-1136769

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 3	City / State / Zip 4
D	MATHEWS, MICHAEL C	11266 W. HILLSBOROUGH AVE., #316	TAMPA FL 33635

300008879403  
11/07/02--01097--003 \*\*158.75

8. Name and Address of Current Registered Agent

WOLFE, RANDOLPH J  
100 N. TAMPA ST., STE. 2700  
TAMPA FL 33602

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State  
FL

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

 SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date 11/6/02

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.

SIGNATURE:

 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael C. MATHEWS

Date

Daytime Phone

11/5/02 (813) 855-0344

CR2E040 (8/02)



November 5, 2002

Division of Corporations  
Annual Report/Reinstatement Section  
PO Box 6327  
Tallahassee, Florida 32314-6327

Dear Agent:

Please consider this letter as an official notification that this company, *Stillwater Media Group, Inc.* (Document Number P01000063962), failed to receive the two prior Uniform Business Reports that were to be filed with your office earlier this year. We request that the reinstatement fee be waived since we did not receive the prior report mailings.

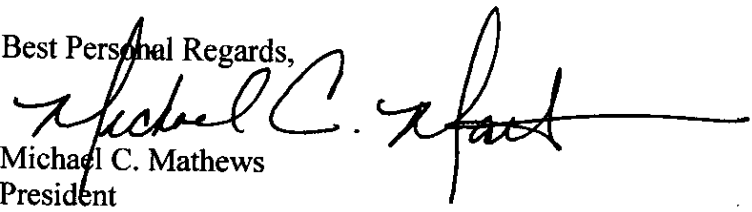
Our current mailing address, which is the same address filed with the Florida Division of Corporations is:

***Stillwater Media Group, Inc.***  
11266 W. Hillsborough Ave., #316  
Tampa, Florida 33635-9762

Enclosed with this letter, please find our completed application for reinstatement and a check in the amount of \$158.75 for the Uniform Business Report filing fee, as well as the fee to acquire a Certificate of Status from your office.

If you have any questions, please feel free to contact me at (813) 855-0344.

Best Personal Regards,

  
Michael C. Mathews  
President

*Stillwater Media Group, Inc.*

Cc: Randolph J. Wolfe, Esquire, Registered Agent

***Stillwater Media Group, Inc.***  
11266 West Hillsborough Avenue, Suite 316, Tampa, Florida 33635  
(813) 855-0344