

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 JAN 28 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000069590

1. Corporation Name

Technical Diversity Systems, Inc.

2. Principal Office Address - No P.O. Box #

283 Cranes Roost Blvd.

3. Mailing Office Address

Suite, Apt. #, etc.

Suite 111

Suite, Apt. #, etc.

City & State

Altamonte Springs

City & State

Zip

32704

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/20/2003

5. FEI Number

☒ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Frederick D. Glover

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

283 Cranes Roost Blvd.

Suite, Apt. #, Etc.

Suite 111

City

Altamonte Springs

State

FL

Zip Code

32704

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

300117554743
02/08/08--01005--009 **500.00

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

REGISTERED AGENT MUST SIGN

300117554743
02/08/08--01005--010 **258.75
Date 1/28/08

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
ODT	Frederick D. Glover	910 Lake Destiny Rd. Unit-F	Altamonte Springs, 32714
VPD	Garold Gipson	910 Lake Destiny Rd. Unit-F	Altamonte Springs, 32714
VPD	Mary D. Glover	910 Lake Destiny Rd. Unit-F	Altamonte Springs, 32714
VPD	Garland Ross	1121 Washington Ave.	Winter Park, 32789
VPD	Cynthia Scott	12041 Fambridge Rd.	Orlando, Fl. 32837

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 contained in Chapter 119, 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:

01/24/08

407-215-7474

REINSTATEMENT

04-08

11280