

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

00 JUN 23 PM 2:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P34754**

1. Corporation Name

L. Cannon Associates, Inc.

2. Principal Office Address

103-104 CORPORATE DR. EAST

Suite, Apt. #, etc.

City & State

LANGHURNE PA

Zip

19047

Country

USA

3. Mailing Office Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

7/22/1991

5. FEI Number

04-3048466

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

National Corporate Research, Ltd., Inc.

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

1406 Hays Street, Suite #2

Suite, Apt. #, Etc.

Suite #2

City

Tallahassee,

State

FL

Zip Code

32301

SP

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

John Morrissey, VP REGISTERED AGENT MUST SIGN

Date

6-1-00

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
CO. P/S	<u>TAYLOR PICKETT</u> Robert F. Morrissey, Jr.	<u>103-104 RIDGE BROOK RD</u> 1016 W. Ninth Ave.	<u>SPARKS / MD / 21152</u> King of Prussia, PA 19406
" / T	<u>SALLY WEISBERG</u> Robert F. Morrissey, Jr.	<u>103-104 CORPORATE DRIVE, EAST</u> 1016 W. Ninth Ave.	<u>LANGHURNE PA 19047</u> King of Prussia, PA 19406
VP	Robert F. Morrissey, Jr.	1016 W. Ninth Ave.	King of Prussia, PA 19406
S	Bewley, Peter	1016 W. Ninth Ave.	King of Prussia, PA 19406
VPT	Esposito, Ray	1016 W. Ninth Ave.	King of Prussia, PA 19406
VP	<u>McDonald, Richard A</u>	1016 W. Ninth Ave.	King of Prussia, PA 19406

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:

Taylor Pickett TAYLOR PICKETT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/99)