

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

98 JAN 20 PM 12:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000022907**

1. Corporation Name

SUN DIRECTORY GRAPHICS, INC.

Principal Place of Business

5112 TROUBLE CREEK RD.
NEW PORT RICHEY FL 34652

Mailing Address

5112 TROUBLE CREEK RD.
NEW PORT RICHEY FL 34652

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

03/23/1993

5. FEI Number

59-3181325

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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	PETERSON, WALTER L JR	18161 GARDENDALE DR	TAMPA FL 33624
P	PETERSON, THOMAS A.	7951 EMPIRE COURT	NEW PORT RICHEY FL 34654
VP	PETERSON, THOMAS A	7851 EMPIRE COURT	NEW PORT RICHEY FL 34654
ST	PETERSON, ROXANA J	4510 CARROLLWOOD VILLAGE DR	TAMPA FL 33624
			100002408021-9 -01/22/98--01007--010 ****\$50.00 ****\$50.00
			SL 1-21-98

8. Name and Address of Current Registered Agent

PETERSON, WALTER L JR
18161 GARDENDALE DRIVE
TAMPA FL 33624

9. Name and Address of New Registered Agent

Name

PETERSON, THOMAS A.

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

7951 EMPIRE COURT

Suite, Apt. #, Etc.

City

NEW PORT RICHEY

State
FL

Zip Code

34654

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

Thomas Peterson

REGISTERED AGENT MUST SIGN

Date

12/2/97

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:

Thomas Peterson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS A. PETERSON PRESIDENT

12/2/97

Date

(813) 847-6263

Daytime Phone #

CR20040 (8/97)