

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000010561

1. Corporation Name

ROYAL SYSTEMS GROUP, INC.

Principal Place of Business

1537 CEDAR BAY RD.
JACKSONVILLE FL 32218

Mailing Address

1537 CEDAR BAY RD.
JACKSONVILLE FL 32218

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

1252 CHEROKEE RD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

LOUISVILLE KY

Zip

Zip

40204

Country

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1 D	ROYAL, MADELYN A	1537 CEDAR BAY RD.	JACKSONVILLE FL 32218

600002562000--?
-06/16/98-01121-009
***1200.00 ***1200.00

8. Name and Address of Current Registered Agent

BERG, REBECCA L
701 FISK STREET
SUITE 310
JACKSONVILLE FL 32204

9. Name and Address of New Registered Agent

Name
MADELYN A ROYAL
Street Address (P.O. Box Number is Not Acceptable)
1537 CEDAR BAY RD
Suite, Apt. #, Etc.
City
JACKSONVILLE

State
FL Zip Code
32218

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

Madelyn Anne Royal

REGISTERED AGENT MUST SIGN

Date
5/22/97

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box (See other side for additional information.)

12. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes No (See other side for information on Intangible tax.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

Bridgid Anne Royal

4/30/98 502 459 7980

CR2049 (6/95)