

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

97 DEC 11 AM 8:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000067689**

1. Corporation Name  
**BARRY ALLEN & ASSOCIATES INC.**

Principal Place of Business  
**3752 GORHAM WAY  
BOCA RATON FL 33487**

Mailing Address  
**3752 GORHAM WAY  
BOCA RATON FL 33487**



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

4. Date Incorporated or Qualified  
To Do Business in Florida

**09/12/1994**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

**65-0519601**

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	ALLEN, BARRY	3752 GORHAM WAY	BOCA RATON FL
STD	ALLEN, RENA	3752 GORHAM WAY	BOCA RATON FL

100002373961--7  
-12/16/97--01107--003  
\*\*\*\*165.00 \*\*\*\*165.00

DB 12-12-97

8. Name and Address of Current Registered Agent

**ALLEN, BARRY  
3752 GORHAM WAY  
BOCA RATON FL 33487**

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.

Signature of  
Registered Agent

*Barry Allen*

REGISTERED AGENT MUST SIGN

Date **12/1/97**

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:

*Barry Allen* **Barry Allen**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**12/1/97**  
Date

**761/241-7344**  
Daytime Phone #

CR2E040 (8/97)

**BARRY ALLEN & ASSOCIATES**  
COMMUNICATIONS COUNSELING AND SERVICES

December 8, 1997

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Attention: Andy Dunlap

My apologies for not including a written statement on why I am omitting the reinstatement fee.

I first filed the 1997 Annual Report and fee in January, 1997. After three months of waiting and not wanting to miss the May deadline I called the Division of Corporations and was told that my check would probably clear shortly and not to worry. The second time I filed in early September, I was told not a problem, just pay the original \$165. This time I sent the check registered. This is the third time I have submitted this request.

Under the circumstances, I do not believe it is fair that I should be penalized, because of a problem that was not of my making.

Sincerely,

  
Barry Allen