

PLEASE READ ALL INSTRUCTIONS BEFORE C

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 FEB 24 PM 12:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000035286

1. Corporation Name

St. Edward's Corporation

2. Principal Office Address

7848 Shoupe Road

3. Mailing Office Address

7848 Shoupe Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Plant City, FL

City & State

Plant City, FL

Zip 33565

Country
U.S.A.

Zip 33565

Country
U.S.A.4. Date Incorporated or Qualified
To Do Business in Florida 4/21/97

5. FBI Number

59-3447667

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒\$6.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Lawrence S. Tierney

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

7848 Shoupe Road

Suite, Apt. #, Etc.

City Plant City

State
FLZip Code
33565

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

Date 2/18/03

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
Pres.	Lawrence S. Tierney	7848 Shoupe Road	Plant City, FL 33565
VP	Cynthia Tierney	7848 Shoupe Road	Plant City, FL 33565

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lawrence S. Tierney

2/18/03

Date

954-523-8985

Daytime Phone #

Florida Department of State
Division of Corporations
Public Access System

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Division of Corporations
Fax Number : (850) 205-0384

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Account Name : ADORNO & YOSS, P.A. - Lutz M. Taylor
Account Number : 076247002423
Phone : (954) 763-1200
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CORPORATION REINSTATEMENT

ST. EDWARD'S CORPORATION

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$1,658.75

INCORRECT AMOUNT. PLEASE CHARGE OUR ACCOUNT THE CORRECTED SUM OF \$1,508.75.