

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 OCT 20 PM 1:02

DOCUMENT # P98000086890

1. Corporation Name

TALION CORPORATION

Principal Place of Business

160 RIVER OAKS RD.
MELBOURNE BEACH FL 32951

Mailing Address

160 RIVER OAKS RD.
MELBOURNE BEACH FL 32951

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business In Florida

10/09/1998

5. FEI Number

59-3536841

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	DOHERTY, BRIAN	160 RIVER OAKS RD.	MELBOURNE BEACH FL 32951
D	MAXNER, KATHRYN	160 RIVER OAKS RD.	MELBOURNE BEACH FL 32951

800003027318--1
-10/28/99--01002--015
***150.00 ***150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

SUNDIN, GLENN T
335 S. PLUMOSA ST.
MERRITT ISLAND FL 32952

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

Glenn T. Sundin
REGISTERED AGENT MUST SIGN

Date 10-14-99

11. 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:

Brian Doherty
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/14/99

Daytime Phone #

(47) 951-2758

CR25040 (8/99)

GLENN T. SUNDIN

ATTORNEY AT LAW

335 SOUTH PLUMOSA STREET, SUITE A

MERRITT ISLAND, FLORIDA 32952

LL.M. (TAXATION)
CERTIFIED PUBLIC ACCOUNTANT (FLORIDA)

(407) 455-1511
FAX (407) 455-1646

October 17, 1999

Division of Corporations
Annual Report/Reinstatement Section
P. O. Box 6327
Tallahassee, Florida 32314-6327

Re: Reinstatement of Talion Corporation
Doc No. P98000086890

Dear Madam or Sir:

We have enclosed the fully executed Application For Reinstatement for the above-referenced corporation. My clients, Mr. Brian Doherty and Ms. Kathryn Maxner, never received the original annual report for their corporation and as a result did not timely file its report. We called your office and the individual who answered told us that we only needed to pay \$150.00 since my clients never received the report for their corporation. As a result, we have enclosed a check made payable to the Florida Department of State for \$150.00. Please process these documents accordingly.

If you have any questions or comments concerning this matter please feel free to contact me.

Sincerely,

Glenn T. Sundin

Glenn T. Sundin

Enclosures