

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION**  
**REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE  
Tallahassee, Florida  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P99000008780**

1. Corporation Name

**100 OLDE MANDARIN, INC.**

Principal Place of Business

**11363 SAN JOSE BLVD. BLDG. 100  
JACKSONVILLE FL 32257**

Mailing Address

**11363 SAN JOSE BLVD. BLDG. 100  
JACKSONVILLE FL 32257**

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

**01/28/1999**

5. FEI Number

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<br>Title(s) | 2<br>Name of Officers<br>and/or Directors | 3<br>Street Address of Each<br>Officer and/or Director | 4<br>City / State / Zip |
|---------------|-------------------------------------------|--------------------------------------------------------|-------------------------|
| D             | CURLEY, R K                               | 11363 SAN JOSE BLVD. BLDG. 100                         | JACKSONVILLE FL 32257   |
| D             | HEALEY, MARK                              | 11363 SAN JOSE BLVD. BLDG. 100                         | JACKSONVILLE FL 32257   |
|               |                                           |                                                        |                         |
|               |                                           |                                                        |                         |
|               |                                           |                                                        |                         |
|               |                                           |                                                        |                         |
|               |                                           |                                                        |                         |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**CRAWFORD, JOHN R  
225 WATER STREET STE. 900  
JACKSONVILLE FL 32202**

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

**SIGNATURE REQUIRED**  
REGISTERED AGENT MUST SIGN

Date **10/18/00**

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.

**KE**

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**10/18/00**

**904-288-6161**

2072

*100 Olde Mandarin, Inc.  
11363 San Jose Boulevard Building 100  
Jacksonville, FL 32223*

October 17, 2000

Via Certified Mail

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

Re: Request for waiver of Penalty for Reinstatement for 100 Olde Mandarin, Inc.

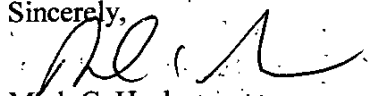
To Whom it May Concern,

I have filled out the form for reinstatement for the 100 Olde Mandarin, Inc. It is my responsibility to file the form for the Department of State. 100 Olde Mandarin, Inc. was formed by our attorney, or the registered agent John R. Crawford, in January of 1999. The corporation was formed for the purpose of building and owning a commercial office building. It took substantially longer to build the building than first anticipated. The building was not completed until April of 2000. We did not move our office to the building until May and we didn't start to receive mail at that address until June. We forwarded all of our mail from our previous address to our P. O. Box. The mailing address on the notice of dissolution form was to the building. When the first notice should have been sent out the building was not completed. All of the mail should have gone to our P. O. Box; however we are aware of other mail that was sent to the 11363 address Building 100 that did not make it to the P.O. Box.

We did not receive a second notice either, probably because the first one was sent back. I apologize for the mistake. Yes, it is our responsibility to find out where the notice is and file it at the proper time. My only defense for that is this is the first time I have had the responsibility to file this and I was not aware of the timeframe. If I, or anyone else in the office had received the notices then we would have filed immediately. Because we didn't it was left up to me to know when and where to find the notice and I was not aware of either.

I called your office upon receiving the notice of dissolution and someone told me to send in the form, the original filing fee of \$150 and a letter explaining the circumstances of the late filing. If you have any questions regarding this matter please do not hesitate to call me at 288-6161.

Sincerely,



Mark C. Healy  
Vice President & CFO