

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

02 JAN 31 PM 12:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P18472

1. Corporation Name

ACS DATA ENTRY, INC.

Principal Place of Business

510 WEST PARKLAND DRIVE  
SANDY UT 84070

Mailing Address

2828 N. HASKELL  
10TH FLOOR  
DALLAS TX 75204

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

03/18/1988

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

87-0430896

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)

| Title(s)<br>1 | Name of Officers<br>and/or Directors<br>2              | Street Address of Each<br>Officer and/or Director<br>3          | City / State / Zip<br>4                       |
|---------------|--------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------|
| CD            | RICH, JEFFREY A                                        | 2828 N. HASKELL AVENUE                                          | DALLAS TX 75204                               |
| P             | <del>BLODGETT, LYNN</del><br>Blodgett, Tom             | <del>3988 N CENTRAL EXPRESSWAY</del><br>510 W. Parkland Dr.     | <del>DALLAS TX 75204</del><br>Sandy, UT 84070 |
| VP            | <del>BLODGETT, THOMAS</del><br>Rexford, John           | <del>510 W. PARKLAND DRIVE</del><br>2828 N. Haskell Ave., FL-10 | <del>SANDY UT 84070</del><br>Dallas, TX 75204 |
| S D           | <del>BLACK, DAVID W</del><br>William L. Deckelman, Jr. | 2828 N. HASKELL AVENUE                                          | DALLAS TX 75204                               |
| T             | VINEYARD, NANCY                                        | 3988 N. CENTRAL EXPRESSWAY                                      | DALLAS TX 75204                               |
| D<br>AS       | <del>HORTENSTINE, HENRY</del><br>Lewis, Wayne R.       | 2828 N. HASKELL AVE                                             | DALLAS TX 75204                               |

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
-1288 SO PINE ISLAND ROAD  
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

C T Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

200004911492--7

City

Plantation

02/12/02

01046-002

\*\*\*\*750.0PL

\*\*\*\*750.00

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  
CONNIE BRYAN  
SPECIAL ASSISTANT SECRETARY  
REGISTERED AGENT MUST SIGN

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-02/12/02-01046-001

\*\*\*\*158.75

\*\*\*\*158.75

Date

1/31/02

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:

Wayne R. Lewis

REQUIRE

Wayne R. Lewis, Asst. Secretary 01/30/2002 214.841.6286

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #