

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
10 MAR 24 PM 2:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N03000001959

1. Corporation Name

PEACE RIVER WOODCARVERS, INC.

2. Principal Office Address - No P.O. Box #

2626 NE Highway 70, Lot 56

Suite, Apt. #, etc.

3. Mailing Office Address

2626 NE Highway 70, Lot 56

Suite, Apt. #, etc.

City & State

Arcadia, Florida

Zip

34266

Country

USA

City & State

Arcadia, Florida

Zip

34266

Country

USA

300173045583  
03/24/10-01035-023 \*\*490.00  
**REINSTATEMENT** 06-LR

4. Date Incorporated or Qualified  
To Do Business in Florida

03/04/2003

5. FEI Number  
80005802

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required  
for a Certificate of Status

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

7. Name and Address of Current Registered Agent

Name

Paul Bennett Seusy, Esq.

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

203 West Oak Street

Suite, Apt. #, Etc.

City

Arcadia

State

FL

Zip Code

34266

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

*Paul Bennett Seusy*  
REGISTERED AGENT MUST SIGN

Date 03/22/2010

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
C	RICHARD BURGESS	2626 NE Highway 70, #56	Arcadia, Florida 34266
S	JANE BURGESS	2626 NE Highway 70, #56	Arcadia, Florida 34266
T	SHARON HOLDERMAN	2626 NE Highway 70, #313	Arcadia, Florida 34266

10. E-mail Address: paul@arcadialawfirm.com

(To be used for future annual report notification)

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. I further certify, 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:

*Paul Bennett Seusy*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard Burgess, Chairman

Date 03/22/2010

315-214-9405  
Daytime Phone #

3/25/10