

**2016 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N98000000731

**Entity Name:** WAKE UP AMERICA OF LAKE FAIRWAYS, INC.

**Current Principal Place of Business:**

C/O CECILE FULLER  
10941 LONE PALM. COURT  
N. FORT MYERS, FL 33903

**Current Mailing Address:**

C/O CECILE FULLER  
10941 LONE PALM COURT  
N. FORT MYERS, FL 33903 US

**FEI Number:** 65-0811718

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FULLER, CECILE C  
C/O CECILE C FULLER  
10941 LONE PALM COURT  
N. FORT MYERS, FL 33903 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** CECILE C FULLER

04/27/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name ACKLEY, LEWIS  
Address 19679 EAGLE TRACE COURT  
City-State-Zip: N. FORT MYERS FL 33903

Title VPD  
Name SMITH, HAROLD  
Address 19746 FRENCHMAN'S COURT  
City-State-Zip: N. FORT MYERS FL 33903

Title D  
Name ROBERTS, TERRY A  
Address 19268 GREEN VALLEY COURT  
City-State-Zip: N. FORT MYERS FL 33903

Title SD  
Name FULLER, LEONARD  
Address 10941 LONE PALM COURT  
City-State-Zip: N. FORT MYERS FL 33903

Title TD  
Name FULLER, CECILE C  
Address 10941 LONE PALM COURT  
City-State-Zip: N. FORT MYERS FL 33903

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CECILE C FULLER

TREASUER

04/27/2016

Electronic Signature of Signing Officer/Director Detail

Date