

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **429177**

1. Corporation Name
WISE MARINE CONSTRUCTION, INC.

FILED

97 MAY 27 PM 1:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
**5809 BEGGS RD.
ORLANDO FL 32810**

Mailing Address
**5809 BEGGS RD.
ORLANDO FL 32810**

REINSTATEMENT *95-97*
DO NOT WRITE IN THIS SPACE

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

06/27/1973

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-1469536

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

500002196685--3

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City, State, Zip
PDS	WISE, WARREN R	140 MINNEHAHA ROAD	MAITLAND, FL 00000
SEC	WISE, JOSPEH W.	140 MINNEHAHA RD.	MAITLAND, FL 32751
TRES	WISE, CHRISTOPHER R.	1631 LASBURY AVE.	WINTER PARK, FL 32789

8. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent

**CUNNINGHAM, JAMES R
1220 HARTFORD BUILDING
200 EAST ROBINSON STREET
ORLANDO FL 32810**

Name
address correction only same Reg. Agent
Street Address (P.O. Box Number is Not Acceptable)
1220 Eola Park Centre
Suite, Apt. #, Etc.
200 East Robinson Street
City
Orlando State **FL** Zip Code **32801**

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

REGISTERED AGENT MUST SIGN

Date **5/22/97**

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box (See other side for additional information.)

12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No (See other side for information on intangible tax.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

Warren R. Wise/President

5/22/97

407-297-0181

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR22040 (8/95)