

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10/2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 FEB 26 PM 2:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 506050

1. Corporation Name

WATSON, FOLDS, STEADHAM, & WALKER, P.A.

2. Principal Office Address

4131 NW 28th Lane

Suite, Apt. #, etc.

Suite 2

City & State

Gainesville, FL

Zip

32606

Country

USA

3. Mailing Office Address

P.O. Box 358686

Suite, Apt. #, etc.

City & State

Gainesville, FL

Zip

32635-8686

Country

USA

REINSTATEMENT

62-04

**4. Date Incorporated or Qualified
To Do Business in Florida**

7/1/76

5. FEI Number

59-1674625

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ **YES**

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

William B. Watson

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

4131 NW 28th Lane

800029474658

Suite, Apt. #, Etc.

Suite 2

City

Gainesville

State
FL

Zip Code
32606

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**

William B. Watson

REGISTERED AGENT MUST SIGN

Date 2/25/04

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 |
|--------|--------------------------------------|---|-----------------------|
| P/S/D | William B. Watson III | 4131 NW 28th Lane | Gainesville, FL 32606 |
| | | | |
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| | | | |
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10. 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:

William B. Watson III, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/04

Date

3523728401

Daytime Phone #

6

282



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 460884 80531A

AUTHORIZATION : *Patricia Pajito*

COST LIMIT : \$ 1050.00

ORDER DATE : February 26, 2004

ORDER TIME : 1:58 PM

ORDER NO. : 460884-005

CUSTOMER NO: 80531A

CUSTOMER: Fay Lasseter, Legal Assistant
Watson & Watson
527 East University Avenue

Gainesville, FL 32601

DOMESTIC FILINGS

NAME: WATSON, FOLDS, STEADHAM,
& WALKER, P.A.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward

EXAMINER'S INITIALS _____

RECEIVED
04 FEB 26 PM 2:37
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA