

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 NOV 24 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 816853

1. Corporation Name

THE WEALDEN COMPANY, INC.

2. Principal Office Address

2005 82nd Ave.

3. Mailing Office Address

330 N 74th ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Vero Beach, FL

City & State

Seattle, WA

Zip

32900

Country

USA

Zip

98103

Country

USA

REINSTATEMENT 03

4. Date Incorporated or Qualified To Do Business in Florida

1962

5. FEI Number

510099012

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

MOSS, HENDERSON, BLANTON, LANIER, KRETSCHMER & MURPHY P.A.

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

817 BEACHLAND BLVD.

Suite, Apt. #, Etc.

500024950475

11/24/03--01023--010 **750.00

City

VERO BEACH

State

FL

Zip Code

32904

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

[Handwritten Signature]
REGISTERED AGENT MUST SIGN

Date 19 Nov 03

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
PD	J. GREGORY WHARTON	330 N 74th ST SEATTLE, WA 98103	
VTD	KENNETH B. WHARTON	210 CALDERON AVE #106	MOUNTAIN VIEW, CA 94041 91303
SD	JEAN W. PETTITT	1001 ARBOLADO RD	SANTA BARBARA, CA

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J. GREGORY WHARTON
PRESIDENT

11/9/2003
Date

(206) 789-5055
Daytime Phone #

CR2E081 (10/02)