

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

01 OCT 17 AM 9:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **838302**

Corporation Name

Williams-Russell and Johnson, Inc.

500004657825--3
-10/29/01--01080--013
****758.75 ****758.75

REINSTATEMENT

1. Principal Office Address		3. Mailing Office Address	
771 Spring Street, NW Suite, Apt. #, etc.		771 Spring Street, NW Suite, Apt. #, etc.	
City & State Atlanta, Georgia		City & State Atlanta, Georgia	
Zip 30308	Country USA	Zip 30308	Country USA

4. Date Incorporated or Qualified To Do Business in Florida April 27, 1977	
5. FEI Number 58-1269958	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name Mr. Tyrone C. Williams	
Street Address (P.O. Box Number is Not Acceptable) 3900 NW 79th Avenue	
Suite, Apt. #, Etc. Suite 520	
City Miami	State FL Zip Code 33166-6549

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 Tyrone C. Williams Date October 22, 2001
REGISTERED AGENT MUST SIGN

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
COB/COO	Pelham C. Williams	1250 Clearview Drive, SW	Atlanta, GA 30311
Pres./COO	Charles E. Johnson	2807 Alameda Trail	Decatur, GA 30034
Prin./Dir.	Linnie Adams White	3872 Cheru Drive	Decatur, GA 30034
Sr.VP/Dir.	Jitendra V. Carpenter	487 Cove Drive	Marietta, GA 30067
VP/Dir.	Pelham L. Williams	503 Champion Drive	Duluth, GA 30097

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:

Charles E. Johnson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/22/2001

Date

404/853-6800

Daytime Phone #

CR2E081 (8/00)