

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F10592

Entity Name: W. KOST, INC.

**FILED**  
**Oct 06, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4175 MARTIN HWY  
PALM CITY, FL 34990

**New Principal Place of Business:**

**Current Mailing Address:**

4175 MARTIN HWY  
PALM CITY, FL 34990

**New Mailing Address:**

FEI Number: 59-2041673

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

KOST, WALTER G  
4175 MARTIN HIGHWAY  
PALM CITY, FL 34990 US

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

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: WALTER G. KOST

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: KOST, WALTER G  
Address: 4175 MARTIN HWY  
City-St-Zip: PALM CITY, FL 34990

Title: VP  
Name: KOST, BEVERLY A  
Address: 4175 MARTIN HWY  
City-St-Zip: PALM CITY, FL 34990

Title: PV  
Name: KOST, CHRISTOPHER J  
Address: 4175 MARTIN HWY  
City-St-Zip: PALM CITY, FL 34990

Title: ST  
Name: WALKER, SHIRLEY  
Address: 4175 MARTIN HWY  
City-St-Zip: PALM CITY, FL 34990

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTOPHER J. KOST

PV

10/06/2010

Electronic Signature of Signing Officer or Director

Date