

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

00 AUG -1 AM 7:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F 32754

1. Corporation Name

Whitmore Paving, Inc.

PO Box 17976

West Palm Beach, FL 33416-7976

W-17665

2. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

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

1/31/87

5. FEI Number

65-0050357

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

860

7. Name and Address of Current Registered Agent

Name

Cynthia Fletcher

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

2825 South Ocean Blvd #200

Suite, Apt. #, Etc.

City

Palm Beach

State
FL

Zip Code

33480

200003342682-4

-08/01/00--01087--007

***2317.50 ***2317.50

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

Cynthia Fletcher

REGISTERED AGENT MUST SIGN

Date 6/26/00

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 |
|---------------------|--------------------------------------|---|--------------------------------|
| President | Jack Whitmore | 3397 Bermuda Road President | Palm Beach Gardens FL 33410 |
| Director | Director | Director | Director |
| | | | |
| | | | LS |
| | | | |

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.

Jack W. Whitmore, President

SIGNATURE:

X Jack W Whitmore

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-27-00

Date

561 793-9238

Daytime Phone #