

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR 97-98
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

98 JAN 26 PM 3:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000003399

1. Corporation Name

WILLIAMS MARKETING GROUP INTERNATIONAL, INC.

Principal Place of Business

2005 RUHL DRIVE
GUTHRIE OK 73044
US

Mailing Address

P.O. BOX 340
GUTHRIE OK 73044
US



REINSTATEMENT 97-98

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

07/26/1993 11/26/98

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

84-1202295

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

32541

U.S.A.

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
OPT	WILLIAMS, THOMAS E.	5400 HWY. 90 EAST, SUITE 200	DESTIN FL 32541
VD	DAVIS, DANIEL	2005 RUHL DRIVE	GUTHRIE OK 73044
SB	DAVIS, CARLA	2005 RUHL DRIVE	GUTHRIE OK 73044
CPT	Williams, Thomas E.	35008 Emerald Coast Parkway Suite 200	Destin, FL 32541
SD	Williams, Ralph C.	200 East Central Street	Bentonville, AR 72712
700002415287--1 -01/28/98--01111--005 ***750.00 ***750.00			

8. Name and Address of Current Registered Agent

WILLIAMS, THOMAS E
5400 HWY. 90 EAST
SUITE 200
DESTIN FL 32541

9. Name and Address of New Registered Agent

Name

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

35008 Emerald Coast Parkway

Suite, Apt. #, Etc.

Suite 200

City

Destin

State

FL

Zip Code

32541

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Thil Williams

Date

11/7/97

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information on Intangible tax.)

12. 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)(f), 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:

Thil Williams

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/7/97

Date

1-800-854-8353

Daytime Phone #

CR2E040 (8/97)