

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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

CORPORATION



FILED

02-APR-29 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F 98000006623

1. Corporation Name

White water Service Company, Inc

2. Principal Office Address

3884 Whitewater Rd

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 953

Suite, Apt. #, etc.

City & State

VAldosta, GA

City & State

LAKE PARK, GA

Zip

31601

Country

Lowndes

Zip

31636

Country

Lowndes

4. Date incorporated or Qualified
To Do Business in Florida

12-29-93

5. FEI Number

58-2084679

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

Gene Buckley

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

12160 SE CR 137

Suite, Apt. #, Etc.

City

Jasper

State
FL

Zip Code

32052

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

Gene Buckley

Date

4-1-02

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
CP	Gene Buckley	3884 Whitewater Road	VAldosta, GA 31601

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:

Gene Buckley CP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-02

Date

229-247-5155

Daytime Phone #

CR2E081 (9/01)

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Whitewater Service
Company, Inc.
P.O.Box 953

Phone: 229-247-5155
Fax: 229-253-9150

Date: 04/01/02

Please reinstate our corporation in Florida. We did not receive the previous years annual reports. Enclosed is a check for \$750.00 which is for the reinstatement fees if the penalty is waived. If penalty is not waived please let me know the additional amount due. Thanks for your help in this matter.

Sincerely


Gene Buckley