

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 02, 2001 8:00 A
Secretary of State

DOCUMENT # F99000004423

1. Corporation Name

Wyandotte Industrial Development Commission
4528 South Sheridan, Suite 105
Tulsa, Oklahoma 74145

2. Principal Office Address

1600 Sarno Road

3. Mailing Office Address:

4528 S. Sheridan Rd.

Suite, Apt. #, etc.

Suite 107

Suite, Apt. #, etc.

Suite 105

City & State

Melbourne, Florida

City & State

Tulsa, Oklahoma

Zip

32935

Country

USA

Zip

74145

Country

USA

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

11/01/98

5. FEI Number

73-1551277

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

Rodney Crocker

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

1600 Sarno Rd

Suite, Apt. #, Etc.

Suite 107

City

Melbourne

State

FL

Zip Code

32935

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

Rodney Crocker

REGISTERED AGENT MUST SIGN

Date

4/18/01

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
P	Leaford Bearskin	64150 E. Highway 60	Wyandotte, Oklahoma 74370
VP	Jim Bland	64150 E. Highway 60	Wyandotte, Oklahoma 74370
S	Ramona Reid	64150 E. Highway 60	Wyandotte, Oklahoma 74370
D	Billy Friend	64150 E. Highway 60	Wyandotte, Oklahoma 74370
D	Rodney Crocker	4528 S. Sheridan, Suite 105	Tulsa, Oklahoma 74145
D	Lucia Hayworth	1600 Sarno Road, Suite 107	Melbourne, FLorida 32935

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:

Rodney Crocker

Rodney Crocker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/01

Date

918-627-9429

Daytime Phone #

CR2E081 (9/00)