PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Sandra B. Mortham FOR FILED Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 98 JUL 22 AM 11: 44 DOCUMENT # 1. Corporation Name O'Dell, Hall & Associates, Inc. SECRETARY OF STATE TALLAHASSEE. FLORIDA d/b/a WALRUS CONSTRUCTION Principal Place of Business Mailing Address 2052 Princeton Street 2052 Princeton Street Sarasota,FL 34237 Sarasota, FL 34237 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, It Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida N/A N/A Suite, Apt. #, etc. 07/01/1984 Suite, Apt. #, etc. 5. FEI Number 59-2416312 Applied For City & State City & State Not Applicable \$8.75 Additional Fee required Zip Country Country CERTIFICATE OF STATUS DESIRED 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) Name of Officers Street Address of Each Title(s) Officer and/or Director (Do NOT Use Post Office Box Numbers) City / State / Zip and/or Directors D/P M.Russell O'Dell 7131 Lago Street Sarasota,FL 34241 D/S Leslie O'Dell 7131 Lago Street Sarasota, FL 34241 3ф0002600733—-3 -n7/28/98--**0107**2--011 ****900.00 ****900.00 8. Name and Address of Cur and Address of New Registered Agent M.Russell O'Dell N/American 7131 Lago Street Street Address (P.O. Box Number is Not Acceptable) Sarasota,FL 34241 Suite, Apt. #, Etc. Zip Code State 10. I, being appointed the registered agost of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. _M.Russell O'Dell Signature of Registered Agen July 20,1998 REGISTERED AGENT MUST SIGN 11. This corporation owes or has paid the current year (See other side for information Yes X Intangible Personal Property tax due June 30. 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)(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.

M. Russell O'Dell, President 07/20/98 (941) 365-9393
SIGNATURE: M. Russell O'Dell, President 07/20/98 (941) 365-9393