

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

FILED

98 DEC 21 PM 6:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **H62620**

1. Corporation Name

WILSON DESIGN GROUP, INC.



REINSTATEMENT

4800

Principal Place of Business Mailing Address
2070 MCGREGOR BLVD 2070 MCGREGOR BLVD
STE #3 STE #3
FORT MYERS FL 33901 FORT MYERS FL 33901
US US
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

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. Date Incorporated or Qualified To Do Business in Florida

06/18/1985

5. FEI Number

59-2521787

Applied For

Not Applicable

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
PD	WILSON, EDGAR A. I	2070-3 MCGREGOR BLVD	FORT MYERS FL
DC	WILSON, EDGAR A., II	2070-3 MCGREGOR BLVD	FORT MYERS FL
VP	JOY, MONICA Delete	2070-3 MCGREGOR BLVD	FT. MYERS FL
ST	WOOD, ALLISYN A Delete	2070-3 MCGREGOR BLVD	FORT MYERS FL
ST	Bungamer, Kristen A.	2070-3 McGregor Blvd.	Fort Myers, FL

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MOORE, DAVID S
2070-3 MCGREGOR BLVD
FORT MYERS FL 33901

Name Edgar A. Wilson, II
Street Address (P.O. Box Number is Not Acceptable) 2070-3 McGregor Blvd
Suite, Apt. #, Etc. 600002723826--4
City Fort Myers State FL Zip Code 33901
Date 11-17-98

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 **SIGNATURE REQUIRED**
REGISTERED AGENT MUST SIGN

Date 11-17-98

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)(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: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 11-17-98 Daytime Phone # 991-394-7141