

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 MAY -5 PM 3:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPLICANT  
FOR  
REINSTATEMENT

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**L01000016636**

1. DOCUMENT # L01000016636

Name and Mailing Address

0000848 01 FP 0.352 \*\*PRSRT T3 0 0615 32810-534010



WEWAHOOTEE FOUNDERS, L.L.C.  
1710 LEE ROAD  
ORLANDO FL 32810-5340

300015649693  
04/10/03--01056--029 \*\*410.00



|  |  |   |  |
|--|--|---|--|
| 2. New Mailing Address<br><br>City, State, Zip                     |  | 4. State/Country of Formation<br>FL   |  |
| Principal Place of Business<br>1710 LEE ROAD<br>ORLANDO FL 32810   |  | 5. Date Organized or Qualified To Do Business in Florida<br>09/27/2001  |  |
| 3. New Principal Place of Business Address<br><br>City, State, Zip |  | 6. FEI Number<br>03-0379473<br>Applied For<br>Not Applicable  |  |
|  |  | 7. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status |  |

|   |  |  |  |
|---|--|--|--|
| 8. Name and Address of Current Registered Agent<br><br>B&C CORPORATE SERVICES OF CENTRAL FLORIDA<br>390 N. ORANGE AVE. SUITE 1100<br>ORLANDO FL 32801 |  | 9. Name and Address of New Registered Agent<br><br>Name<br><br>Street Address (P.O. Box Number is Not Acceptable)<br><br>City<br>FL Zip Code |  |
|---|--|--|--|

10. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of Registered Agent Date 4/7/03  
REGISTERED AGENT MUST SIGN

| 11. Names and Street Addresses of Each Managing Member/Manager |                                   |  |                    |
|--|-----------------------------------|--|--------------------|
| Title(s)   | Name of Managing Members/Managers | Street Address of Each Managing Member/Manager | City / State / Zip |
| Mgr  | DAVID A. JANNEY                   | 1710 Lee Road                                  | Orlando FL 32810   |
| Mgr  | Alfred Carlton Janney             | 1710 Lee Road                                  | Orlando FL 32810   |
|  |                                   |  |                    |
|  |                                   |  |                    |
|  |                                   |  |                    |
|  |                                   |  |                    |

12. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. 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 of Managing Member/Manager Date 4/7/03 Daytime Phone # 407-298-6612

Typed or printed name of signing Managing Member/Manager DAVID A. JANNEY

CR2E084 (8/02)