


# 2005 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 SEP -7 AM 9:15

DOCUMENT # L03000057032	
1. Entity Name WTPM OF PORT CHARLOTTE, FL 33981-2602, LLC	

Principal Place of Business 7334 CANDACE LANE PORT CHARLOTTE, FL 33981-2602	Mailing Address 7334 CANDACE LANE PORT CHARLOTTE, FL 33981-2602
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

04222005 REIN-LLC CR2E101 (6/04)	
4. FEL Number 06-1134303	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent	
HARNACK, ROBERT 270 LAYNE BLVD #302 HALLANDALE, FL 33009	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE	DATE
(NOTE: Registered Agent signature required when reinstating)	

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT WALTER T. HARNACK 7334 CANDACE LANE PT. CHARLOTTE FL 33981-2602	TITLE NAME STREET ADDRESS CITY-ST-ZIP	900059813619 09/21/05--01016--002 **200.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECV-TRES. PAULUS M. HARNACK 7334 CANDACE LANE PT. CHARLOTTE, FL 33981-2602	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE	Walter T. Harnack	DATE	7-12-05	DAYTIME PHONE #	330-497-9360
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					