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SECOND NOTICE: CORPORATION	WILL BE DISSOLVE	D ON OR AFTER	SEPTEMBER 30,	1998.
AMOUNT DUE ON OR BEFORE 09/30/98:	\$550 (IF DISSOLVED, MIN	IIMUM AMOUNT DUE	TO REINSTATE: \$750)	١.

AMOUNT DU	JE ON OR BEFORE 09/30/98: \$550 (IF DISS	OLVED, MINIMUM AMOUNT DUI	E TO REINSTATE: \$750).	•
PROFIT FLORIDA DEPARTMENT OF STATE				
CORPORATION Sandra B. Mortham				
	JAL REPORT	Secreta	ary of State	, , , , , , , , , , , , , , , , , , , ,
	1998	DIVISION OF	CORPORATIONS	98 OCT 29 AM IO: 42
DOCU 1. Corporation	MENT # L12931	(6)		SECRETARY OF STATE TALLAHASSEE, FLORIDA
BEN WI	THERS, INC.			
Principal Plac	e of Business	Mailing Address	······································	
HWY 98		P.O. BOX 908		
P.O. BOX 908 PANCEA FL 32	2346	P.O. BOX 908 PANACEA FL 32346		DO NOT WRITE IN THIS SPACE
US		US		3. Date Incorporated or Qualified
				09/01/1989
<u> </u>	Place of Business	2a. Mailing Address		4. FEI Number Applied For
Suite, Apt.	# eta	Suite, Apt. #, etc.		59-2965 173 Not Applicable \$8.75 Additional
22 Suite, Apt.	#, a.c.	27 Suite, Apr. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required
City & Stat	te	City & State		6. Election Campaign Financing \$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution Added to Fees
24	25	29	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
_	HERS, BEN		81 Name	
	HWAY 98		82 Street Add	ress (P.O. Box Number is Not Acceptable)
PAN	IACEA FL 32346		83	
			<u> </u>	
			84 City	FL 85 Zip Code
11. Pursuan	t to the provisions of sections 607.0502	and 607.1508, Florida Statute	s, the above-named corpo	pration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered
agent. I	am familiar with, and accept the obligati	ons of, section 607.0505, Fit	orida Statutes.	on's board of directors. Thereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent a	and the Manager of the Control of th	OTE: Registered Agent signature req	uired when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	WITHERS, BEN		1.2 NAME	1000026805415
STREET ADDRESS	US HWY 98, PO BOX 908 NA PANACEA FL		1,3 STREET ADDRESS	-11/04/9801076024
CITY-ST-ZIP TITLE	ST	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	*************************************
NAME	WITHERS, MELISSA DEMENT	☐ DEFEIS	2.2 NAME _	
STREET ADDRESS	US HWY 98, PO BOX 908 NA		2.3 STREET ADORESS	1000026805415
CITY-ST-ZIP	PANACEA FL			
			2.4 CITY-ST-ZIP	****150.00 ****150.00
TITLE		DELETE	3.1 TITLE	*****150.00 *****150.00 Change Addition
NAME		DELETE	3.1 TITLE 3.2 NAME	****150.00 ****150.00
NAME STREET ADDRESS		DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	****150.00 ****150.00
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Florida Department of State Division of Corporations Annual Report Filings P.O. Box 1500 Tallahassee FL 32302-1500

Gentlemen:

Following up our telephone call to your office, enclosed please find our check in the amount of \$150.00 for each of the enclosed annual reports: Ben Withers Inc. and Withers Coastal Marine Construction Inc.

Please be advised that we did not receive the original notices and it may have been because we moved our offices at about that time and they could have been misdelivered. In addition, the company's attorney closed his law office and these notices were sent to him for handling and we have just discovered that they were never sent in. (He has been disbarred.)

It is imperative that these corporations be reinstated at once, and we would appreciate your assistance in getting this accomplished. We regret this late filing, but under the circumstances, we do not believe it— was our fault.

If anything further is needed to get these corporations reinstated, please telephone us at 984-0149.

Sincerely,

Ben Withers, President

for: Ben Withers Inc. and

Withers Coastal Marine Construction Inc.