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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L15816

1. Corporation Name
WESTCOAST MARINE CONTRACTORS, INC.

2. Principal Office Address	3. Mailing Office Address
517 75TH	517 75TH ST.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: HOLMES BEACH FL	City & State: HOLMES BEACH FL
Zip: 34217 Country: US	Zip: 34217 Country: US

4. Date Incorporated or Qualified To Do Business in Florida: 01-02

5. FEI Number: 65-0144675 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Name and Address of Current Registered Agent

Name: CHARLES A POTTER

Street Address (P.O. Box Number is Not Acceptable): 517 75TH ST. HOLMES BEACH FL

Suite, Apt. #, Etc.:

City: HOLMES BEACH FL State: FL Zip Code: 34217

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0509, F.S.

Signature of Registered Agent: Charles Potter III Date: 4/11/02
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/S/T	CHARLES A POTTER	517 75TH ST HOLMES BEACH FL 34217	HOLMES BEACH FL 34217

10. 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: Charles Potter CHARLES A POTTER III Date: 4/11/02 Daytime Phone #: 302-4111 (941)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)205-0384

From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850)521-1000
Fax Number : (850)521-1030

RESUBMIT
Please give original submission date as file date.

CORPORATION REINSTATEMENT

WESTCOAST MARINE CONTRACTORS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	3
Estimated Charge	$900.00