PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Α	PPLICATION
٥	FOR
ŖEI	NSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim_Smith **b**LState

DOCUMENT #

.97069

1. Corporation Name

LAWRENCE A. WATERS, JR. CORPORATION

Principal Place of Business

2. New Principal Office Address, If Applicable

Mailing Address

LARRYS AUTOWORKS 51 PASADENA AVE **ST PETE FL 33707**

6331 10TH AVENUE. SOUTH **GULFPORT FL 33707**

3. New Mailing Office Address, If Applicable

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

_	Data Incorporated or Ouglified
4.	Date Incorporated or Qualified
	To Do Business in Florida

FILED

02 OCT 29 AM 10: 27

SECRETARY OF STATE TALLAHASSEE, FLORIDA

500008674035 10/29/02--01132--016 **150.00

08/31/1990

		LANNYS AUTOWORKS				To Do Business in Florida 08/31/1990			
Suite, Apt. #, etc. City & State Zip Country		Suite, Apt. #, ofg. 51 PASADENA AV S.				5. FEI Number	,	<u> </u>	Applied For
		City & State STUETERS BURG 7L Zip 33267 Country USA			6.	59-3024401	Not Applicable		
					4	1	CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee refor a Certificate of Sta		
7. Names	and Street Addresses of Each Officer and	/or Director (Flo	rida nonp	rofit corporation	ns must list at lea	ast 3 directors)			
Title(s)	Name of Officers and/or Directors				Address of Eacl r and/or Directo		City / State / Zip		
PD	WATERS, LAWRENCE A. JR.		6331	10TH AVENUI	E \$0.		GULFPORT FL		
STD	WATERS, ANN M.		6331 10TH AVENUE SO.				GULFPORT FL		
8. Name and Address of Current Registered Agent						9. Name and	 \ddress of New Regist	ered Agent	
WATERS, LAWRENCE A., JR. 6331 10TH AVENUE SOUTH GULFPORT FL 33707				5	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code				

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. or 617.0505, F.S.

Date 10-22-02

11. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER

Untitled

To whom it may concern,

To the best of my knowledge We didn't recieve the UBR notices this year.

I am sure I would have sent the report in on time as this very important.

I would like to continue the corporation if possible. I would like to change

the Mailing address to where I do Business. Enclosed is a check for the

filing fee of \$ 150.00 dollars. New mailing address.

Larry's Autoworks 51 Pasadena ave so St Petersburg Fl 33707

Daytime phone 727 381-4883 Thank you

Lawrence A Waters Jr

President of Lawrence A | Waters Jr Corporation