

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

09 OCT 16 AM 9:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JS  
10-20

**DOCUMENT # M55425**

**1. Corporation Name**

West Valley Financial Management Inc

**2. Principal Office Address - No P.O. Box #**

991-C Lomas Santa Fe

**3. Mailing Office Address**

991-C Lomas Santa Fe

Suite, Apt. #, etc.

#249

Suite, Apt. #, etc.

#249

City & State

Solana Beach

City & State

Solana Beach

Zip

CA

Country

92075

Zip

CA

Country

92075

400161993704  
10/21/09--01039--002 \*\*2100.00  
CR2E081 (12/08)

**REINSTATEMENT**

**4. Date Incorporated or Qualified  
To Do Business in Florida** 07/13/1987

**5. FEI Number**  
33-0240856

☐ Applied For  
☐ Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐ \$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name  
N Lloyd Burrows

Street Address (P.O. Box Number is Not Acceptable)  
5401 SW 77 Court

Suite, Apt. #, Etc.  
108-E

City  
Miami

State  
FL

Zip Code  
33156

☐ The reinstatement fee is imposed, except in  
circumstances which the entity did not receive  
the prior notices. By checking this box, you  
are certifying the prior notices were not  
received and requesting the reinstatement  
fee be waived.

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of  
Registered Agent

*N Lloyd Burrows*  
REGISTERED AGENT MUST SIGN

Date 10/19/09

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

| Titles | Name of<br>Officers and/or Directors | Street Address of Each<br>Officer and/or Director | City / State / Zip     |
|--------|--------------------------------------|---|------------------------|
| P      | John McGinnis                        | 991-C Lomas Santa Fe #249                         | Solana Beach, CA 92075 |
| D      | Kimberly McGinnis                    | 991-C Lomas Santa Fe #249                         | Solana Beach, CA 92075 |
| D      | N. Lloyd Burrows                     | 5401 SW 77 Court, #108-E                          | Miami, FL 33156        |
|        |                                      |   |                        |
|        |                                      |   |                        |
|        |                                      |   |                        |

**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 contained in Chapter 119, 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 OR DIRECTOR

*John McGinnis*

Date

10/17/09 (858) 401 9340

Daytime Phone #