

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

#988

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2011 APR 25 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N04000008277

1. Corporation Name

DM/41 Crossroads Association, Inc.

400198595094
04/25/11--01053--008 **61.25
400198595094
03/18/11--01036--012 **236.25

CR2RC81 (11/10)

2. Principal Office Address - No P.O. Box #
2001 S.E. Tenth Street

3. Mailing Office Address
2001 S.E. Tenth Street

Suite Apt. #, etc.

Suite Apt. #, etc.

City & State

Bentonville, AR

City & State

Bentonville, AR

Zip

72716-5525

Country

USA

Zip

72716-5525

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida 08/24/2004

5. FEI Number
208944332

Registered Tax
Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$0.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
CT Corporation Systems

Street Address (P.O. Box Number is Not Acceptable)
1200 S. Pine Island Road

Suite Apt. # Etc.

City
Plantation

State & Zip Code
FL 33324

REINSTATEMENT

RZH

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the provisions of section 607.0503 or 617.0503, F.S.

Signature of
Registered Agent

Barbara A. Burke

Barbara A. Burke
Special Assistant Secretary

Date

3/2/11

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
D	Karen Benson	2001 S.E. Tenth Street	Bentonville, AR 72716-5525
D	Nick Goodner	2001 S.E. Tenth Street	Bentonville, AR 72716-5525
D	Bob Hagman	2956 Wentworth Way	Tarpon Springs, FL 34688
D	Russell E. Kniff	941 Bellclaire Ave, SE	Grand Rapids, MI 49506
D	Barri Tulgetske	2001 S.E. Tenth Street	Bentonville, AR 72716-5525

10. E-mail Address: karen.benson@dwal-mart.com

(To be used for future annual report notification)

11. I, the officer, director, officer or director or the receiver or trustee empowered to prepare and file this certificate, certify that the information provided in 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., and that all fees owed by the corporation have been paid. I further certify the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 817.105, F.S.

SIGNATURE:

Karen Benson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/11

Date

479-273-4065

Daytime Phone #