

2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N09000010802

FILED
Apr 15, 2011
Secretary of State

Entity Name: A WILKERSON ENTERPRISE, INC.

Current Principal Place of Business:

457 BROOK RIDGE CIRCLE
MINNEOLA, FL 34715

New Principal Place of Business:

Current Mailing Address:

PO BOX 1684
MINNEOLA, FL 34755

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILKERSON, WALTER L JR
457 BROOK RIDGE CIRCLE
MINNEOLA, FL 34715 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: WALTER L. WILKERSON, JR

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: WILKERSON, WALTER L JR
Address: 457 BROOK RIDGE CIRCLE
City-St-Zip: MINNEOLA, FL 34715

Title: VP
Name: CANDLER, PAMELA M
Address: 4557 BARBADOS LOOP
City-St-Zip: CLERMONT, FL 34711

Title: OFF
Name: WILKERSON, BRENDA
Address: 556 E. BROOM ST
City-St-Zip: CLERMONT, FL 34711

Title: SEC
Name: YOUNG, NATLIN
Address: 315 BRIMMING LAKE RD
City-St-Zip: MINNEOLA, FL 34715

Title: OFF
Name: MACK, DALE
Address: 13116 SUMMERLAKE WAY
City-St-Zip: CLERMONT, FL 34711

Title: OFF
Name: CLEMPSON, DEDRA
Address: 1159 W MONTROSE ST
City-St-Zip: CLERMONT, FL 34711

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WALTER L. WILKERSON, JR

P

04/15/2011

Electronic Signature of Signing Officer or Director

Date