

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 DEC -2 PM 3:40

DOCUMENT # P00000069393

1. Corporation Name

WAHOO ENTERPRISES, INC.

REINSTATEMENT D2-03

2. Principal Office Address

1254 Highway A-1-A

Suite, Apt. #, etc.

City & State

Satellite Beach, Florida

Zip

32937

Country

USA

3. Mailing Office Address

779 E. Merritt Island Causeway

Suite, Apt. #, etc.

#768

City & State

Merritt Island, Florida

Zip

32952

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

07/17/2000

5. FEI Number

59-3232700

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

John F. Hooley

12/02/03--01065--001 **150.00

Street Address (P.O. Box Number is Not Acceptable)

700 Eleventh Street South

Suite, Apt. #, Etc.

#202

400024490294
12/02/03--01065--001 **150.00

City

Naples

State

FL

Zip Code

34102

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

REGISTERED AGENT MUST SIGN

Date November 4, 2003

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	Alan P. Hooley	779 E. Merritt Island Causeway, #768	Merritt Island, Florida 32952
V	John S. Hooley	462 Summers Creek Drive	Merritt Island, Florida 32952
T	Betty G. Hooley	462 Summers Creek Drive	Merritt Island, Florida 32952
S	John F. Hooley	700 Eleventh St. So., Suite 202	Naples, Florida 34102

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John F. Hooley

11/04/2003 239/774-1400

Date

Daytime Phone #

CH2E081 (10/02)