

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

112

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 SEP 23 AM 9:31

DOCUMENT # P01000017540

1. Corporation Name

F. Williams Paving Co, Inc.

700023265137
09/23/03--01020--001 **300.00

2. Principal Office Address

4220 SHADY OAK DR W

Suite, Apt. #, etc.

City & State

LAKE LAND FL

Zip

33810

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

0203

4. Date Incorporated or Qualified
To Do Business in Florida

2/15/01

5. FEI Number

593698149

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

FRANK WILLIAMS

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

4220 SHADY OAK DR W

Suite, Apt. #, Etc.

City

LAKE LAND

State

FL

Zip Code

33810

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

FRANK WILLIAMS, RA

REGISTERED AGENT MUST SIGN

Date

8/28/03

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

<u>PRESIDENT</u>	<u>FRANK WILLIAMS</u>	<u>4220 SHADY OAK DR W</u>	<u>LAKE LAND, FL 33810</u>

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:

F. Williams Paving Co, Inc.
by Frank L. Williams, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-28-03

Date

863-698-4910

Daytime Phone #

al250
aw

CR2E081 (10/02)