

OCT. 8. 2007 11:13AM

C S C

NO. 848

P. 2

PLEASE READ ALL INSTRUCTIONS BEFORE C

**CORPORATION
REINSTATEMENT**
FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

 FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

07 OCT -8 PM 1:02

DOCUMENT # P01000071864

1. Corporation Name

WFS Services, Inc.

2. Principal Office Address

640 Fiddlewood Road

3. Mailing Office Address

640 Fiddlewood Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Vero Beach, FL

City & State

Vero Beach, FL

Zip

32960

Country

USA

Zip

32960

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida July 20, 2001

5. FSL Number

35-2309881

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$3.75 Additional Fee required
for a Certificate of Status

CR2E081 (12/05)

7. Name and Address of Current Registered Agent

William Schabot

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

640 Fiddlewood Road

Suite, Apt. #, Etc.

City
Vero BeachState
FLZip Code
32960

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0505 or 817.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date 10-3-2007

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
DPS	William F. Schabot	640 Fiddlewood Road	Vero Beach, FL 32960

REINSTATEMENT 04-67

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 807 or 817, 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 807.0401 or 817.0401, 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:

10-3-2007

Date

772-559-654

Daytime Phone

B07000249359

Florida Department of State
Division of Corporations
Public Access System

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To:

Division of Corporations
Fax Number : (850) 617-6384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

CORPORATION REINSTATEMENT

WFS SERVICES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,200.00

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