## Current - reinstate -

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPOI REINSTATE  DOCUME  1. Corporation Na  James	ENT# PO100	Secretary DIVISION OF CO	of State DRPORATIONS	:	FILED PR 15 AH II: 23 DRETARY OF STATE AHASSEE, FLORIDA			
Baun Baun 2. Principal Office	esville, 12 326	3. Mailing Office Address		8	000163227	<b>4</b> :⊇		
1505 F4 Suite, Apt. #) etc.	. Clarke Blvd	Suite, Apt. #, etc.		800016322748 04/18/0301041018 **300.00				
City & State		City & State		To Do Bus		401 Applied For		
<u>Gaunesvi</u> 32606	dountry USA	Zip	Country	6.		Additional Fee required a Certificate of Status		
Nam Stree	t Address (P.O. Box Number is No	agner	dress of Current Register		SS and Alams			
Suite, Apt. # Etc. 8201 > CHAN  City Gaenesville					N APPRESS ON NAME  VOE FORM  State Zip Code  FL 32606			
8. I, being appoin Signature of Registered Agent	ted the registered agent of the above	ve named corporation, am fa	·	bligations of sec	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CR2E081 (9/01)		
9. Names and St	reet Addresses of Each Officer and	or Director (Florida nonprof		<u></u>				
Titles	itles Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip			
Pres. J	. James L. Wagner		1505 Ft. Clarke		Garnesville, FL 32606			
this reinstatem owed by the co	am an officer or director or the receinent application, the reason for dissorproration have been paid and the retion is true and accurate, and my significant to the control of the contro	olution has been eliminated, ames of individuals listed or gnature shall have the same	the corporate name satisfies this form do not qualify for	s the requirement an exemption un	ts of section 607.0401 or 617.040	1, F.S., that all fees nformation indicated		

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. TO BELOW

CORPORATION REINSTATEMENT	Secre	ARTMENT OF STATE etary of State				
DOCUMENT # NAME  1. Corporation Name  JC W FNVESTO  11415 N-W. 10th  GAINESUILLE, FL	MENT ROPERT LN.	TIES, INC.				
2. Principal Office Address  11415 N.W. 10 <sup>+1</sup> LN.  Suite, Apt. #, etc.	3. Mailing Office Ad  SAM  Suite, Apt. #, etc.					
City & State  GAINESUILE, F. 3  Zip Country	City & State		Date Incorport	ess in Flori	ida (0/24	Applied For Not Applicable
Zip Country 32606 USA	Zip	Country	6. CERTIFICATE			iionilkaeguled iiioiaedSalus
Street Address (P.O. Box Number is  11415 N. V.  Suite, Apt. #, Etc.  City GA/WESUILLE  8. I, being appointed the registered agent of the a  Signature of Registered Agent		am familiar with and accept the o	obligations of section	State <b>FL</b> n 607.0505	Zip Code 3 2 6 0 6 or 617.0503, F.S.	
9. Names and Street Addresses of Each Officer	and/or Director (Florida no	inprofit corporations must list at le	east 3 directors)			
Titles Name of Officers and/or Director	ors	Street Address of Each Officer and/or Director			City / State / Zip	
BRES. JAMES L. WA	16NER 114	15 NW joth L	<i>v</i> .	6Ā11	vesüille, 61	· 3260G
10. I certify that I am an officer or director or the re this reinstatement application, the reason for cowed by the corporation have been paid and to on this application is true and accurate, and m	dissolution has been elimina the names of individuats list	ated, the corporate name satisfies ted on this form do not qualify for	s the requirements of an exemption unde	of section 6	607.0401 or 617.0401, F.S	S., that all fees

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Florida Department of State: Division of Corporation

April 10, 2003

## To Corporate filing dept.:

In a recent conversation with your department to attempt to register a name change for my current corporation (James L. Wagner Enterprises, Inc.) I was informed of my delinquency to send in my annual corporate responce and \$150 fee. I did not receive notice indicating the need for such action as we had moved and the notice did not reach me. Upon set-up of my corporation, my CPA did not inform me of this requirement. I apologize for this mistake and am forwarding the \$300 that your office has asked for per this recent conversation to reinstate my corporation along with the additional form to change the corporate name upon reinstatement.

Thank you for your understanding and assistance in this process. Should you have any further questions please contact me at 904-881-6277. I will await your future responce indicating the changes.

Sincerely,

ames L. Wagner