

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

182

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 DEC 12 PM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600025464426
12/12/03--01063--014 **150.00
600025464426
12/12/03--01063--013 **150.00

DOCUMENT #

P01000103874

1. Corporation Name

Nothing But Wood, Inc.
1025 Hollywood Ave
Clearwater, FL 33759

2. Principal Office Address

Same

3. Mailing Office Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

USA

Zip

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

10/25/01

5. FEI Number

59-3750945

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

Larry Bell

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

1025 Hollywood Ave

Suite, Apt. #, Etc.

City

Clearwater

State

FL

Zip Code

33759

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

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	Larry Bell	1025 Hollywood Ave	Clearwater, FL 33759

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:

Larry Bell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

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JACOBS ACCOUNTING, INC.
2121 MAIN STREET
DUNEDIN, FL. 34698

11/20/2003

FLORIDA DEPARTMENT OF STATE
DIV. OF CORPORATIONS
P. O. BOX 6327
TALLAHASSEE, FL. 32314

TO WHOM IT MAY CONCERN,

ENCLOSED ARE TWO CHECKS IN THE AMOUNT OF \$ 150.00 EACH FOR THE
REINSTATEMENT OF **NOTHING BUT WOOD, INC.**

WE ARE REQUESTING THAT THE LATE FILING FEES BE WAVED. MR. BELL MOVED AND
DID NOT RECEIVE THE ANNUAL REPORTS FOR 2002 AND 2003. WE APPRECIATE YOUR
HELP IN THIS MATTER.

IF YOU HAVE ANY QUESTIONS PERTAINING TO THIS MATTER PLEASE CALL 727-210-2552.

RESPECTFULLY SUBMITTED,



HARLEY JACOBS
ACCOUNTANT