

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

DOCUMENT # P02000034797

1. Corporation Name

Williams Investments of Georgia, Inc.

2. Principal Office Address

3546 Oak Street

Suite, Apt. #, etc.

3. Mailing Office Address

3546 Oak Street

Suite, Apt. #, etc.

City & State

Jacksonville, FL

City & State

Jacksonville, FL

Zip

32205

Country

Zip

32205

Country

7. Name and Address of Current Registered Agent

Name

Thomas H. Warlick

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

100 Golden Bay Boulevard

Suite, Apt. #, Etc.

City

Oak Hill

State  
**FL**

Zip Code  
**32759**

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

Date

*4/26/05*

REGISTERED AGENT MUST SIGN

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
D	Samuel T. Williams	3546 Oak Street	Jacksonville, FL 32205

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

Samuel Taylor Williams

4-28-03

386-345-2536

Date

Daytime Phone #

CR2E081 (01/06)

FILED  
05 MAY -2 PM 5:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REINSTATEMENT**

4. Date Incorporated or Qualified  
To Do Business in Florida

3/29/2002

5. FEI Number  
30-0094566

Applied For  
Not Applicable

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required  
for a Certificate of Status