

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000134437

FILED
Oct 25, 2004
Secretary of State

Entity Name: WSD INC.

Current Principal Place of Business:

1546 FERENDINA DR.
DELTONA, FL 32725

New Principal Place of Business:

137 CONCORD DRIVE
SUITE 1113
CASSELBERRY, FL 32707 US

Current Mailing Address:

1546 FERENDINA DR.
DELTONA, FL 32725

New Mailing Address:

137 CONCORD DRIVE
SUITE 1113
CASSELBERRY, FL 32707

FEI Number: 68-0573188

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WHERRELL, NEVIN
1546 FERENDINA DR.
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

WHERRELLE, NEVIN D MR.
137 CONCORD DRIVE
SUITE 1113
CASSELBERRY, FL 32707 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: NEVIN WHERRELL

10/25/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WHERRELL, NEVIN
Address: 1546 FERENDINA DR.
City-St-Zip: DELTONA, FL 32725

Title: D () Delete
Name: WHERRELL, LORA
Address: 3782 GATLIN PLACE CIRCLE
City-St-Zip: ORLANDO, FL 32812

Title: D (X) Delete
Name: WHERRELL, MARCIA
Address: 1546 FERENDINA DR.
City-St-Zip: DELTONA, FL 32725

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WHERRELL, NEVIN D MR.
Address: 137 CONCORD DRIVE SUITE 1113
City-St-Zip: CASSELBERRY, FL 32707 US

Title: D (X) Change () Addition
Name: WHERRELL, LORA A MS.
Address: 3782 GATLIN PLACE CIRCLE
City-St-Zip: ORLANDO, FL 32812 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NEVIN WHERRELL

D

10/25/2004

Electronic Signature of Signing Officer or Director

Date