

2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000135350

1. Entity Name
WAYNE W. MARTIN, INC.



Principal Place of Business

9651 NE 60 ST
BRONSON, FL 32621

Mailing Address

9651 NE 60 ST
BRONSON, FL 32621

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10222004

REIN-P

CR2E098 (6/04)

4. FEI Number

200410728

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MARTIN, WAYNE W
9651 NE 60 ST
BRONSON, FL 32621

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Wayne W. Martin

(NOTE: Registered Agent signature required when reinstating)

10-25-04

DATE

FILE NOW!!! FEE IS \$150.00

After January 1, 2005, Fee will be \$300.00

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

10. OFFICERS AND DIRECTORS

TITLE D
NAME MARTIN, WAYNE W
STREET ADDRESS 9651 NE 60 ST
CITY-ST-ZIP BRONSON, FL 32621

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

600042354656
11/01/04--01058--024 **150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

600042354656
11/01/04--01058--025 **8.75

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☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Wayne W. Martin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-25-04

DATE

352 318-7998
352 221-5318

Daytime Phone #