2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000140916

Entity Name: WALTER WILSON SERVICE, INC.

FILED Nov 17, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

656 NW 158TH LANE 12955 SW 16TH COURT

PEMBROKE PINES, FL 33028 **SUITE #204**

PEMBROKE PINES, FL 33027

Current Mailing Address: New Mailing Address:

656 NW 158TH LANE 12955 SW 16TH COURT

PEMBROKE PINES, FL 33028 PEMBROKE PINES, FL 33028

FEI Number: 20-0436145 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WILSON, WALTER WILSON, WALTER 656 NW 158TH LANE 12955 SW 16 COURT

PEMBROKE PINES, FL 33028 US PEMBROKE PINES, FL 33028 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: WALTER WILSON 11/17/2005

> 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: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete WILSON, WALTER WILSON, WALTER Name: Name: 656 NW 158TH LANE 12955 SW 16 COURT Address: Address:

City-St-Zip: PEMBROKE PINES, FL 33028 City-St-Zip: PEMBROKE PINES, FL 33027

Title: Title: (X) Change () Addition () Delete Name: WILSON, CONSTANCE N Name: WILSON, CONSTANCE N

656 NW 158TH LANE Address: 12955 SW 16 COURT Address:

PEMBROKE PINES, FL 33028 PEMBROKE PINES, FL 33027 City-St-Zip: 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: WALTER WILSON 11/17/2005 D