

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1072

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 DEC 22 AM 11:49

CLERK OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P04000045955  
1. Corporation Name WALTER YOUNG CONCRETE INC.

REINSTATEMENT 05-06  
W06000052527  
CR2E081 (12/05)

2. Principal Office Address <u>357 SE 9th Ter.</u>		3. Mailing Office Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <u>Williston FL</u>		City & State	
Zip <u>32696</u>	Country <u>USA</u>	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida <u>3/8/04</u>	
5. FEI Number <u>20-0875886</u>	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$6.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name <u>WALTER YOUNG</u>	
Street Address (P.O. Box Number is Not Acceptable) <u>357 SE 9th Ter.</u>	500082285175 12/05/06--01011--010 **150.00
Suite, Apt. #, Etc.	500082285175 12/05/06--01045--014 **150.00
City <u>Williston</u>	State <u>FL</u> Zip Code <u>32696</u>

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 10/28/06

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
P-U-D	WALTER YOUNG	357 SE 9th Ter	Williston FL 32696

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 contained in Chapter 119, 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 Walter Young 10/28/06 321-9511  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

2082

**Walter Young Concrete Inc**  
**357 SE 9<sup>th</sup> Terrace**  
**Williston FL 32696**  
**352-321-9511**

Florida Department. of State  
Secretary of State  
Division of Corporations  
P.O Box 6327  
Tallahassee FL 32314

RE: P04000045955

Enclosed is the reinstatement application for the above corporation. This corporation never received the notice to file the corporate annual report. Due to hurricane damage the corporate office had to be relocated.

If you have any questions please call me at the above number.

*X Walter Young*

Walter Young  
President