


2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P04000085419		
1. Entity Name WAG OF ORANGE COUNTY, INC.		

FILED
07 MAY 30 AM 11:09
TALLAHASSEE, FLORIDA

Principal Place of Business 4514 PARKBREEZE COURT ORLANDO, FL 32808 US	Mailing Address 1332 FALCONWOOD CT. APOPKA, FL 32712 US
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2. Principal Place of Business 1332 Falconwood Ct Suite, Apt. #, etc.	3. Mailing Address 1332 Falconwood Ct Suite, Apt. #, etc.
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City & State Apopka FL	City & State Apopka FL	4. FEI Number 20-1190612	Applied For Not Applicable
Zip 32712	Country Orange	Zip 32712	Country Orange

8. Name and Address of Current Registered Agent MULLER, DICK 1127 S. PATRICK DRIVE #3 SATELLITE BEACH, FL 32937	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 Dick Muller (NOTE: Registered Agent signature required when reinstating) DATE 5/21/07

FILE NOW!!! FEE IS \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GORDON, WAYNE 1332 FALCONWOOD CT APOPKA, FL 32712 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Gordon, Marisol 1332 Falconwood Ct Apopka, FL 32712 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Gordon DATE 5/21/07 407-8866835
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR