

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000121805

**FILED**  
**Oct 28, 2008**  
**Secretary of State**

**Entity Name:** CARL WHITELEY INC

**Current Principal Place of Business:**

6385 SCORPIO AVE  
NORTHPORT, FL 34287

**New Principal Place of Business:**

**Current Mailing Address:**

6385 SCORPIO AVE  
NORTHPORT, FL 34287

**New Mailing Address:**

PO BOX 249  
MURCHISON, TX 75778

**FEI Number:** 20-5588357

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHITELEY, CARL  
6385 SCORPIO AVE  
NORTHPORT, FL 34287 US

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

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: CARL WHITELEY

\_\_\_\_\_  
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: P ( ) Delete  
Name: WHITELEY, CARL  
Address: 6016 MERRILL STREET  
City-St-Zip: NORTHPORT, FL 34287

Title: V ( ) Delete  
Name: ASH, DARRELL  
Address: 5497 LADY SLIPPER  
City-St-Zip: NORTH PORT, FL 34287

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: ASH, DARRELL  
Address: 5497 LADY SLIPPER  
City-St-Zip: NORTH PORT, FL 34287

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CARL WHITELEY

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

10/28/2008

\_\_\_\_\_  
Date