

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		APPROVED AND FILED 99 MAR 11 PM 1:45 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # P33618					
1. Corporation Name W. C. Bradley Co.					
Principal Place of Business 1017 Front Ave. Columbus, GA 31901			Mailing Address P.O. Box 140 Columbus, GA 31902-0140		
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable			3. New Mailing Office Address, If Applicable		
Suite, Apt. #, etc			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. Date Incorporated or Qualified To Do Business in Florida 4/16/91					
5. FEI Number 58-1605660					
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status					
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
1	2	3	4	5	6
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip		
CEO	Stephen T. Butler	1017 Front Ave.	Columbus, GA 31901		
COO	William B. Turner, Jr.	1017 Front Ave.	Columbus, GA 31901		
CFO	Calvin J. Martin, Jr.	1017 Front Ave.	Columbus, GA 31901		
ST	Robert H. Wright, Jr.	1017 Front Ave.	Columbus, GA 31901		
AS	Richard W. Fowler	1017 Front Ave.	Columbus, GA 31901		
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8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent		
F & L Corp. 200 Laura Street Jacksonville, FL 32202			Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc City State FL Zip Code		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.					
Signature of Registered Agent Charles V. Hedrick REGISTERED AGENT MUST SIGN			Date 2/24/99		
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (See other side for information on intangible tax.)					
12. 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 under section 119.07(3)(i), 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: Richard W. Fowler SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			2/24/99 Date 706-571-6050 Daytime Phone #		

CP2E081 (12/98)