

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 OCT -9 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P39623

1. Corporation Name

KWH Constructors, Inc.

Principal Place of Business

200 S. Cherry St.
Monticello, FL
32344

Mailing Address

P.O. Box 867
Monticello, FL
32344

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

SAME AS ABOVE

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

1155 N. State Street

Suite, Apt. #, etc.

Suite 420

City & State

Bellingham, WA

Zip

98225

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

7/14/92

5. FEI Number

91-1529125

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$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)

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
1	2	3	4
Pres	Robert Hawk	2792 Norland Ave.	Burnaby, BC, Canada
VP	Jeffrey Mullins	2455 W. 18 th Ave	Vancouver, B.C., Canada
Tres	Peter Sanderson	2521 W. 3 rd Ave	Vancouver, BC Canada
			200002662632-3
			-10/13/98-01049-005
			****308.75 ****308.75

8. Name and Address of Current Registered Agent

Paul T. Rudhuff
RTE 4, Box 4307
Monticello, FL 32344

9. Name and Address of New Registered Agent

Name

Gerald Hocking

Street Address (P.O. Box Number is Not Acceptable)

200 S. Cherry St.

Suite, Apt. #, Etc.

City

Monticello

State

FL

Zip Code

32344

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

Gerald Hocking

REGISTERED AGENT MUST SIGN

Date 10/9/98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(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 terminated, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OCT 7/98 (360) 734-4700

Date

Daytime Phone #