

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR 96-97
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

Pg. 1082

97 AUG 15 PM 12:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95-000012163

1. Corporation Name

Wiley Wing, Inc.

1996-1997 Annual Reports.

Principal Place of Business

Mailing Address

1236 NE 39th Road
Ocala, FL 34470

1236 NE 39th Road
Ocala, FL 34470

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

4. Date Incorporated or Qualified
To Do Business in Florida

February 13, 1995

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-3309418

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D/P/S T	Douglas Wing	1236 NE 39th Road	Ocala, FL. 34470

900002270959-7
-08/19/97--01033--002
***365.00 ***365.00

J. Alan
8/15/97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Linda D. Schoonover, Esquire
390 W State Road 434
Suite 200
Longwood, FL. 32750

Name

Brenda L. D'Arville, E.A.

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

19120 E. Pennsylvania Ave.

Suite, Apt. #, Etc.

Suite C

City

Dunnellon,

State

FL

Zip Code

34432

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

Brenda L. D'Arville

REGISTERED AGENT MUST SIGN

Date

8/04/97

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes.

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 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:

Douglas Wing

8-12-97

352 236-3192

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

D'Arville & Co., Inc.

TAX & ACCOUNTING SERVICE

19120 E. PENNSYLVANIA AVE. SUITE C
DUNNELLON, FLORIDA 34432

352 / 489-0202

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August 7, 1997

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

Re: Wiley Wing, Inc.
Request for Waiver of Reinstatement Fee

Dear Agent:

The purpose of this letter is to request a waiver of the \$585.00 Reinstatement Fee for Wiley Wing, Inc. for failure to file the corporate annual report.

Mr. Wing, the President and sole shareholder, moved during 1996 and filed a change of address with the post office. He was not aware of the law requiring him to call the Secretary of State's office with his new address. He **did not receive** the annual report.

As his new Registered Agent, I have explained this law to Mr. Wing and I can assure you the annual reports will now be filed in a timely manner.

Thank you for any favorable consideration you can give to this matter.

Sincerely,

Brenda L. D'Arville, E.A.

Brenda L. D'Arville, E.A.
For the firm