

APPLICATION
FOR
REINSTATEMENT



FLORIDA SECRETARY OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 JAN 13 PM 12:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000069460

1. Corporation Name

CHARLES E. WALTERS, INC
3002 Southshore Circle
TALLAHASSEE FL 32312

Principal Place of Business

P.O. Box 338
SILVER SPRINGS, FL 34488

Mailing Address

3002 Southshore Cir.
TALLAHASSEE, FL 32312

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

5. FEI Number

59-3336932

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)

| 1 Title(s) | 2 Name of Officers and/or Directors | 3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) | 4 City / State / Zip |
|---------------|---|--|-------------------------|
| PRES. | CHARLES E. WALTERS | 3002 Southshore Cir. | TALLAHASSEE, FL 32312 |
| SEC/TREAS | KATHY WALTERS | 3002 Southshore Cir. | TALLAHASSEE, FL 32312 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

300002742753--0
-01/15/99-01003-007
****300.00 ****300.00

8. Name and Address of Current Registered Agent

CHARLES E. WALTERS
3002 SOUTHSORE CIR
TALLAHASSEE FL 32312

9. Name and Address of New Registered Agent

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 E. Walters

REGISTERED AGENT MUST SIGN

Date 1/13/99

11. This corporation owes 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHARLES E. WALTERS

Date

Daytime Phone #

1/13/99

800-656-7222

CR2E081 (12/98)

pg 2

JANUARY 13 1999

Florida DEPT of STATE - DIVISIONS of CORPORATIONS

RE: APPLICATION FOR REINSTATEMENT - CHARLES E. WATERS, INC.

GENTLEMEN:

I did not receive my RENEWAL document for the
ABOVE CORPORATION and I did not know about the
ANNUAL FEE REQUIRED FOR CORPORATIONS.

Sincerely,

Charles E. Waters
Pres