

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
977 Sandra B. Mortham
Secretary of State
4/12 DIVISION OF CORPORATIONS

DOCUMENT # P96000084343

1. Corporation Name

WILBANKS & ASSOCIATES, INC.

Principal Place of Business

1002 AVE SOUTH STE 300 NORTH
ST PETERSBURG FL 33701

Mailing Address

1002 AVE SOUTH STE 300 NORTH
ST PETERSBURG FL 33701

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

10/09/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

✓ Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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.	DAVID H. WILBANKS	100 Second Ave S. Suite 300N ST PETERSBURG FL. 33701	St. Petersburg FL. 33701

000002369480--5
-12/11/97--01056--017
****165.00 ****165.00

12-10-97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

WILBANKS, DAVID H
1002 AVE SOUTH STE 300 NORTH
ST PETERSBURG FL 33701

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

David Wilbanks

REGISTERED AGENT MUST SIGN

Date

11-17-97

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 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)(l), 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:

David Wilbanks

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID H. WILBANKS

Date

11/17/97

Daytime Phone #

(813) 823-3187

CR20040 (8/97)

City Center Building
100 2nd Avenue South, Suite 300 North Tower
Post Office Box 3642
St. Petersburg, FL 33731
Phone: (813) 823-3187
Fax: (813) 822-6416

Northwestern
Mutual Life®

DAVID H. WILBANKS
District Agent

Karen W. Houser, Administrative Assistant

Joe P. Teague, General Agent

December 2, 1997

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

Re: Wilbanks & Associates, Inc.

Dear Sirs,

Enclosed please find a reinstatement application for the above referenced corporation, as well as my check in the amount of \$165.00 for filing same.

The purpose of this letter is to request that the Department of State waive the fee for the reinstatement of this corporation. Upon placing a call to the Department of State, I was told we did not receive either the annual report or the notice of failure to file the annual report, because of an incorrect address and subsequently, those documents were returned undelivered to your office. The problem in delivery was in the proper addressing of the mailed documents. Our address as detailed in the Articles of Incorporation was listed as **100 2nd Ave, South, Suite 300 North, St. Petersburg, FL 33701**. The address used for the annual report was incorrectly listed as **100-2 AVE SOUTH STE 300 NORTH**, and therefore the annual report and subsequent notice were never delivered and were returned to your office.

I am enclosing herein a copy of the certified copy of the Articles of Incorporation, which correctly show the appropriate address. I regret that the Postal Service could not have determined where our offices were located.

I thank you in advance for your consideration in waiving the reinstatement fee for this corporation.

Best regards,



David H. Wilbanks