

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Jim Smith**  
Secretary of State  
DIVISION OF CORPORATIONS

02 SEP -9 PM 12:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P97000038003

**1. Corporation Name**

G.L.A.W. FUTONS, INC.

500007731225--9

-09/13/02--01039--020

\*\*\*1050.00 \*\*\*1050.00

**REINSTATEMENT** 00-02

**2. Principal Office Address**

1401 E. Fowler Avenue

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33612

Country

USA

**3. Mailing Office Address**

1401 E. Fowler Avenue

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33612

Country

USA

**4. Date Incorporated or Qualified  
To Do Business in Florida**

04/28/1997

**5. FEI Number**

59-3456788

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

WENDLING, ALLEN EDWARD

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

1401 East Fowler Avenue

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33612

**8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**

Signature of  
Registered Agent

*Allen E. Wendling*  
REGISTERED AGENT MUST SIGN

Date

9-6-02

**9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)**

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PSTD	Wendling, Allen Edward	1401 E. Fowler Avenue	Tampa, FL 33612

**10. 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:

*Allen E. Wendling*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9-6-02  
813-228-7411

CR2E081 (2/01)

91 9/10/02



# FOWLER WHITE BOGGS BANKER

ATTORNEYS AT LAW

ESTABLISHED 1943

September 6, 2002

Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

Re: G.L.A.W. Futons, Inc.

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find Corporation Reinstatement, along with a check in the amount of \$1,050.00 to cover the filing fee for Annual Report through 2002.

Thank you for your attention to this matter.

Sincerely,

Hunter J. Brownlee

HJB:lb

Enclosures

cc: Mr. Allen E. Wendling (w/o Encls.)

H:\HJB\lrs\172.wpd

FOWLER WHITE BOGGS BANKER P.A.

TAMPA • CLEARWATER • FORT MYERS • NAPLES • ST. PETERSBURG • TALLAHASSEE

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