PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINS ATEVENT FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS									FILED 02 FEB 27 AM 8: 45 SECRETARY OF STATE TALLAHASSEE, FLORIDA				
DOCUMENT # p97000102767 1. Corporation Name Elk, Inc. 1928 Benton Avenue Niceville, FL 32578									TALL	AHASSE	E. FLORIC	iA	
	i Office Addre		d	3. Mailing Office Address 1928 Benton Avenue				AMM OL JUST					
Suite, Apt. #	, etc.	· .		Suite, Apt. #, etc.				4. Date Incorporated or Qualified To Do Business in Florida 12/04/1997					
City & State		· - pr	للتن ويتعمرون شدورة	City & State Niceville, FL				5. FEI Number Applied For					
Zip 3257	Country U.S.A.		Zip 32578		Country U.S.A	•	6.						
<u> </u>	7. Name and Address of Current Registered Agent												
Street Address (P.O. Box Number is Not Acceptable) 1928 Benton Avenue -04/12/02-01043-020 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 *****300.00 *****300.00 *****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****300.00 ****3													
9. Names	and Street Ad	dresses of E	ach Officer and	/or Director (Fig	orida nonprol	it corporations m	ust list at lea	ast 3 directors)		<u>.</u>	······································		
Titles	Name of Officers and/or Directors			• .		Street Addr Officer and		<u></u>	City / State / Zip				
P	James Eric Williams				Benton								
T	Kenneth W. Williams			ams	1928 Benton Aver 1025 Everglades						578		
								-					
										11-4.			
							=						
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 filling 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:													
		GNATURE AN	TYPED OR PRI	NTED NAME OF	SIGNING OFF	CER OR DIRECTO	R		Date		Daytime Phone #		

pg 2082



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CERTIFIED PUBLIC ACCOUNTANTS BUSINESS CONSULTANTS

A Limited Liability Partnership

January 31, 2002

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

Re: Elk, Inc.

Federal Identification Number 59-3492256

Corporation Reinstatement

Dear Sir / Madam:

Enclosed you will find the application for corporation reinstatement on the above referenced corporation.

The principle address and the mailing address of the corporation were incorrect in your records. The Uniform Business Report has not been received. Enclosed you will also fins a check in the amount of \$300 remitting the annual filing fee for 2001 and the current year.

We respectfully request that your records be corrected and the corporation be reinstated. Please abate any penalties and interest that may have been incurred. If you have any questions regarding this matter, please contact our office.

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Sincerely,

Members

American Institute of Certified Public Accountants Florida Institute of Certified Public Accountants Alabama Society of Certified Public Accountants Mississippi Society of Certified Public Accountants Division of CPA Firms SEC Practice Section

BDO SEIDMAN ALLIANCE AN INDEPENDENT MEMBER Deanna, L. Muldowney, CPA Carr, Riggs, & Ingram, LLP