

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P98000083090

**Entity Name:** WICKSHAW PROPERTIES, INC.

**FILED**  
**Jun 03, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

239 STATE ROAD 16  
ST. AUGUSTINE, FL 32095

**New Principal Place of Business:**

**Current Mailing Address:**

239 STATE ROAD 16  
ST. AUGUSTINE, FL 32095

**New Mailing Address:**

**FEI Number:** 59-3606576

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEBEGERN, JOSEPH K  
4 OFFICE PARK DR. STE. 260-C  
PALM COAST, FL 32137 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SHIRLEY HALLMAN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PDT  
Name: HALLMAN, SHAW  
Address: 3800 SOUTH CROSS ROAD  
City-St-Zip: ST AUGUSTINE, FL 32092

Title: S  
Name: HALMAN, SHIRLEY  
Address: 5300 RIVERVIEW DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32080

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHIRLEY HALLMAN

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

SEC.

06/03/2011

\_\_\_\_\_  
Date