

APPLICATION FOR



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **P99000080225**

1. Corporation Name  
**PALM CONSTRUCTION COMPANY OF WEST FLORIDA**

FILED

01 MAR -7 PM 2:57

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
 199 OLD BEACH RD. BOX 32 199 OLD BEACH RD. BOX 32  
 SANTA ROSA BEACH FL 32459 SANTA ROSA BEACH FL 32459



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable <b>268 Phil Harris Drive</b> Suite, Apt. #, etc.	3. New Mailing Office Address, If Applicable <b>268 Phil Harris Drive</b> Suite, Apt. #, etc.	4. Date Incorporated or Qualified To Do Business in Florida <b>09/10/1999</b>
City & State <del>DeFuniak Springs, FL</del>	City & State <del>DeFuniak Springs, FL</del>	5. FEI Number <b>59-3594264</b>
Zip <b>32433</b>	Country <b>Walton</b>	Applied For <input type="checkbox"/>
Zip <b>32433</b>	Country <b>Walton</b>	Not Applicable <input type="checkbox"/>
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
Pres.	Charles W. Williams II	268 Phil Harris Drive	DeFuniak Springs, FL 32433
Treas.			
V. Pres.	Stephen R. Chamlee	85 Tradewinds Drive	Santa Rosa Bch, FL 32459
Secr.			
			300003851469--2 -03/13/01--01112--022 ****300.00 ****300.00
			60-01 UBR

8. Name and Address of Current Registered Agent <b>CHAMLEE, STEPHEN R</b> <b>199 OLD BEACH RD. BOX 32</b> <b>SANTA ROSA BEACH FL 32459</b>	9. Name and Address of New Registered Agent Name <b>Charles W. Williams II</b> Street Address (P.O. Box Number is Not Acceptable) <del>268 Phil Harris Drive</del> Suite, Apt. #, Etc. City <b>DeFuniak Springs</b> State <b>FL</b> Zip Code <b>32433</b>
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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 *[Signature]* **REQUIRED** Date **03/05/01**  
 REGISTERED AGENT MUST SIGN

11. 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]* **Charles W. Williams II** Date **03/05/01** Daytime Phone # **850-259-0398**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E040 (8/00)



*Palm Construction Co.*  
of West Florida

March 6, 2001

Division of Corporations  
Annual Report/Reinstatement Section  
P. O. Box 6327  
Tallahassee, FL 32314-6327

~~To Whom It May Concern:-~~

I'm sending this letter to reinstate the Corporation:  
Palm Construction Co. of West Florida, Doc. # P99000080225,  
to Active status.

The Corporation Annual Report/Business report was not filed  
due to an incorrect address, and no prior notice was received.

The correct address is: Palm Construction Co. of West Florida  
268 Phil Harris Drive  
DeFuniak Springs, FL 32433

Please send all correspondance to the above address in the  
future.

Sincerely,

Charles W. Williams II  
President  
Palm Construction Co. of W. Fl.