

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

02 SEP 13 PM 1:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

WESLEY DRYWALL INC
5730 PEBBLEVIEW
MILTON FL 32583

2. Principal Office Address

5730 PEBBLEVIEW
MILTON FL 32583

Suite, Apt. #, etc.

City & State

MILTON FL

Zip

32583

Country

USA Santa Rosa

3. Mailing Office Address

SAME AS OFFICE

Suite, Apt. #, etc.

City & State

Zip

Country

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

5. FEI Number

593604365

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

RODNEY WESLEY

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

5730 PEBBLEVIEW

Suite, Apt. #, Etc.

City

MILTON

State

FL

Zip Code

32583

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

X Rodney Wesley

Date

X 9-4-02

REGISTERED AGENT MUST SIGN

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
PD	RODNEY WESLEY	5730 PEBBLVIEW MILTON FL 32583	MILTON FL 32583
VPST	JOLIE WESLEY	5730 PEBBLVIEW MILTON FL 32583	MILTON FL 32583

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:

X Rodney Wesley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

X 9-4-02

Daytime Phone #

X (850) 983-3344

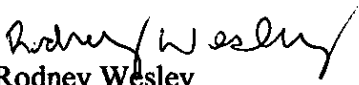
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Florida Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL. 32314

September 7, 2002

To Whom It May Concern:

I recently discovered that our Uniform Business Report has not been filed due to the failure of our original lawyer. In the transition from one lawyer to the next the original Uniform Business Report was never received. Our Certified Public Accountant, Raymond Flores brought this to my attention and contacted an examiner in your department. It was stated during this phone conversation that the penalties would be waived due to these circumstances. We appreciate your consideration.


Rodney Wesley
President-Wesley Drywall Inc.
5730 Pebbleview
Milton, FL. 32583
(850) 983-3344