

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10x2

CORPORATION 2001-2002 UBR		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P99000109024			
1. Corporation Name Woody Wood, Inc.			
2. Principal Office Address 14395 U.S. Hwy 1 Suite, Apt. #, etc.		3. Mailing Office Address 14395 U.S. Hwy 1 Suite, Apt. #, etc.	
City & State Sebastian, FL		City & State Sebastian, FL	
Zip 32958	Country Indian River	Zip 32958	Country Indian River

FILED
02 DEC 31 PM 2:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100009198851
11/25/02--01028--027 **150.00

4. Date Incorporated or Qualified To Do Business in Florida 12/1999

5. FEI Number 65-0985562 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
Curtis R. Mosley

Street Address (P.O. Box Number is Not Acceptable)
1221 E. New Haven Avenue

Suite, Apt. #, Etc.

City
Melbourne

State
FL

Zip Code
32901

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

REGISTERED AGENT MUST SIGN

Date 11-12-02

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
Pres	Dale Woodburn	14395 U.S. Hwy 1	Sebastian, FL 32958

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/12/02

Date

772-589-4018

Daytime Phone #

CR2E081 (9/01)

222

November 5, 2002

Florida Department Of State
Jim Smith
Secretary Of State
Division Of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dale Woodburn, President
Woody Wood, Inc.
14395 U.S. Hwy 1
Sebastian, FL 32958

Recently I applied for a loan at my bank and found out my corporation was not active.

I did not realize that I had not received a renewal notice.

In accordance with your voice response system, I am forwarding a Corporate Reinstatement form along with a check for \$150.00

If you need any further information please contact me at 772-589-4018 and thank you in advance for your prompt attention to this matter.

Submitted By,

Dale Woodburn, President