

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
04 OCT 18 PM 4:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000110081

**1. Corporation Name**

Walk Away Today, Inc.

440 Crescent Pond Drive  
P.O. Box 600601

**2. Principal Office Address**

440 Crescent Pond Drive

Suite, Apt. #, etc.

**3. Mailing Office Address**

P.O. Box 600601

Suite, Apt. #, etc.

City & State

Jacksonville, FL

City & State

Jacksonville, FL

Zip

32259

Country

USA

Zip

32260

Country

USA

**4. Date Incorporated or Qualified**

To Do Business in Florida 12/21/1999

**5. FEI Number**

59-3685512

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

Nancy Crocco

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

440 Crescent Pond Drive

Suite, Apt. #, Etc.

City

Jacksonville

State

FL

Zip Code

32259

**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

*Nancy L Crocco*  
REGISTERED AGENT MUST SIGN

Date 10/13/2004

**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
PR	Nancy Crocco	440 Crescent Pond Drive	Jacksonville, FL 32259

**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:**

*Nancy L Crocco*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/13/2004

Date

904-477-9255

Daytime Phone #

CR2E081 (01/04)

October 13, 2004

Re: Reinstatement for  
Walk Away Today, Inc.  
FEI- 59-3685512

Please consider reinstatement for my corporation.

I did not receive the 2003 or 2004 annual report.

I have enclosed the reinstatement form along with a check for \$300.00.

Thank you,

A handwritten signature in cursive script that reads "Nancy Crocco".

Nancy Crocco  
(904)477-9255