

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 MAY -9 PM 12:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000111800

1. Corporation Name

Great Western Holdings, Inc.

2. Principal Office Address

18245 S.E. Federal Hwy

3. Mailing Office Address

P.O. Box 3448

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tequesta, FL

City & State

Tequesta, FL

Zip

33469

Country

USA

Zip

33469

Country

USA

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

12/30/1999

5. FEI Number

650975106

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
Guy M. Shir

Street Address (P.O. Box Number is Not Acceptable)
500 Australian Ave. So., 9th Floor

Suite, Apt. #, Etc.

City
West Palm Beach

State
FL

Zip Code
33401

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 AGENT INFORMATION REMAINS THE SAME
REGISTERED AGENT MUST SIGN

Date

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
D	Leslie Lynn Dale	1116 Love St.	Jupiter, FL 33477
D	Rhys William Dale	1116 Love St.	Jupiter, FL 33477
P	Leslie Lynn Dale	1116 Love St.	Jupiter, FL 33477
S	Leslie Lynn Dale	1116 Love St.	Jupiter, FL 33477
T	Leslie Lynn Dale	1116 Love St.	Jupiter, FL 33477
V	Rhys William Dale	1116 Love St.	Jupiter, FL 33477

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: Leslie Lynn Dale Leslie Lynn Dale
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/06/2003 561-379-9824

Date

Daytime Phone #

CR2E081 (10/02)

5/19

Great Western Holdings
18245 S.E. Federal Hwy
Tequesta, FL 33469

Tel: 561-747-8888 Fax: 561-747-8442

Department of State
Secretary of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

May 6, 2003

Dear Sir or Madam:

We respectfully request that you reinstate Great Western Holdings, Inc. a FL Corp. since 1999.

We have moved twice since receiving our last notice to file and I believe that the last known address you have was a residence for the Officers/Directors that is no longer valid. We never received any further notices from the State, and thus did not have the opportunity to file and pay on time. I regret any inconvenience this may have caused but I wish to see the Corporation reinstated.

Can you please process the enclosed Form for Corporation Reinstatement and our check # 1128 for \$300.00 (this is the amount I was quoted on the telephone by the State) which should be all you need to reinstate the company.

Our Registered Agent Mr. Guy M. Shir and his information have not changed.

Yours truly,



Leslie Dale

Encl: Corporation Reinstatement 1 pg
Great Western Holdings, Inc. ck# 1128