	PLEASE BEAD		RUCTION			ING THIS FORM	Alexa a
	PLICATION FOR 97-18	A DEPARTMENT OF STATE Sandra B. Mortham Secretary of State			ALPIN AN FILL		
REINSTATEMENT					98 MAR 25 AM 8: 12		
DOCUMENT # V26161 1. Corporation Name WHITE STONE ASSOCIATES, INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Principal Place of Business Mailing Address							
13895 N. INDIAN RIVER DRIVE 13895 N. II			<b>idian River Drive</b> I FL 329 <del>58-346</del> 3				
	addresses are incorrect in any way, line t	hrough Incorrect i	nformation and e	nter correction below.			
440 Royal Palm Way, Stc 100 42 Sulte, Apt. #, etc. Sulte			w Mailing Office Address, If Applicable O Royal Palm Way Apt. #, etc.		·]		04/01/1992
Suik 60 City & State Palm Blach, Fl.		City & State	Suite 100 City & State Palm Beach, FL		59-3112801 Not Applicable		Applied For Not Applicable
<sup>Zip</sup> 334	180 U.S.4.	<sup>Zip</sup> 334		1.3.A.	6. CERTIFICAT		8.75 Additional Fee required for a Certificate of Status
7. Names Title(s)	and Street Addresses of Each Officer an Name of Officers and/or Directors				h		
D	SMITH, RICHARD A.	13695 N. INDIAN RIVER DR - 535 Pajaro St.			SEBASTIAN FL- Salinas, CA	93901	
D	GOMPERS, JOSEPH N. 117 EDGING					WHEELING, W. VA.	
D	WEAVER, GEORGE S. JR.			117 EDGINGTON LANE		WHEELING, W. VA.	26003
			6			010002473300 -03/31/9801044010 *****900.00 ****900.00	
				REINSTATEMENT 97-98			
	8. Name and Address of Currer	t Registered Ag	ent en		9. Name and J	Address of New Registere	$\frac{d}{d} \frac{d}{d} \frac{d}$
SMITH RICHARD A					id M.S	haw	
Street Address Street							
City Palm K						Sta	te Zip Code L 33480
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 Date   Registered Agent Date							
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No X (See other side for information on Intangible tax.)							
this reli owed b on this	y that I am an officer or director or the rec nstatement application, the reason for dis by the corporation have been paid and th application is true and accurate, and my	solution has beer a names of Individ	eliminated, the cluals listed on this	orporate name satisfies s form do not qualify for l effect as If made unde	the requirements an exemption un r oath.	of section 607.0401 or 617	0401, F.S., that all fees . The Information Indicated
SIGNA	SIGNATURE AND TYPED OR F	RINTED NAME OF	SIGNING OFFICER	OR DIRECTOR	111 3.	Date 400	Daytime Phone #

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