

CORPORATION

INCORPORATED



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

03 JUL 21--PM 11:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 418976

1. Corporation Name

EARLEY ENTERPRISES, INC.
3 Forrest Ave
Cocoa Fl 32922

2. Principal Office Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Office Address

3 Forrest Ave

Suite, Apt. #, etc.

City & State

Cocoa Fl

Zip

Country

32922 USA

2000-2003 UBR

4. Date Incorporated or Qualified
To Do Business in Florida

4-1-73

5. FBI Number

59-1449257

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

§ 619, Section 2, Florida
Certificate of Status

7. Name and Address of Current Registered Agent

Name

Norman G Earley

05/23/03 01086 012

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

1076 Farlaw Dr

\$750.00

Suite, Apt. #, Etc.

Rockledge

City

State
FL

Zip Code

32955

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0605 or 617.0603, F.S.

Signature of
Registered Agent

Norman G Earley / Norman G Earley
REGISTERED AGENT MUST SIGN

7/16/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officer and/or Director	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Norman G. Earley	1076 Farlaw Dr Rock Fl	Rockledge Fl 32955
V.P.	Carrie L. Earley	" "	" "
Tres	Norman G. Earley	" "	" "
Sec	Carrie L. Earley	" "	" "

10. I certify that I am an officer or director or the member 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)(a), 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:

Carrie L Earley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/19/03

321-288-3043

Date

Daytime Phone #

Carrie L Earley

7/16/03

2052

June 16, 2003

Florida Department of State
Corporation Reinstatement
P.O. Box 6327
Tallahassee, Fl 32314

To Whom It May Concern:

I did not receive the reinstatement forms for our corporation in 2000.

I ask that you remove the reinstatement fee of \$600.00, and that Earley Enterprises be reinstated. The check I mailed # 1191 was deposited 5/23/03 (01086-012-\$750.00).

I have enclosed the reinstatement form.

Thank you for your cooperation.

Sincerely,

Carrie L. Earley
Carrie L. Earley

2nd Request
you claim you did not
receive this letter and
reinstatement form complete
Thank you
Carrie L. Earley