| API                                                                             | PLICATION                                                                                                                                                                                                                           | 9                                                                           | DEPART<br>Sandia Pro                                                                                                         | onthan                                                                                              | R                                                                                  | <b>F</b>                                                                                                 | anna anna anna anna anna anna anna ann                          | Ó                                                                                                   |  |
|---------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|--|
| REPORT Secretary of State                                                       |                                                                                                                                                                                                                                     |                                                                             |                                                                                                                              |                                                                                                     | 97 JAN 28 PH 2: 27                                                                 |                                                                                                          |                                                                 |                                                                                                     |  |
| 1. Corpora                                                                      | JMENT # 434371<br>hon Name<br>MCRAFT, INC.                                                                                                                                                                                          |                                                                             |                                                                                                                              | SECRETARY OF STATE<br>TALLAHASSEE FLORIDA                                                           |                                                                                    |                                                                                                          |                                                                 |                                                                                                     |  |
| 6235-                                                                           | ace of Business<br>SMeIntosh-Road<br>ota,-FL34238-                                                                                                                                                                                  | Mailin                                                                      | ng Address                                                                                                                   |                                                                                                     | -                                                                                  |                                                                                                          | ·                                                               |                                                                                                     |  |
|                                                                                 | ddresses are incorrect in any way. line th                                                                                                                                                                                          | -                                                                           |                                                                                                                              |                                                                                                     |                                                                                    | DO NOT WRITE IN                                                                                          | THIS SPACE                                                      |                                                                                                     |  |
| 1300 Tangier Way 1300                                                           |                                                                                                                                                                                                                                     |                                                                             | Tangier                                                                                                                      | Tangier Way To Do Bu                                                                                |                                                                                    |                                                                                                          | rporated or Qualified<br>siness in Florica 9/5/73               |                                                                                                     |  |
| Suite, Apt #, etc. Suite, Apt<br>City & State City & State<br>Sarasota, FL Sara |                                                                                                                                                                                                                                     |                                                                             | 5. FEI Numb                                                                                                                  |                                                                                                     |                                                                                    | 1014038                                                                                                  | ·                                                               | Applied For<br>Not Applicable                                                                       |  |
| 3423                                                                            | 9                                                                                                                                                                                                                                   | Zip                                                                         | 239                                                                                                                          | ilry                                                                                                |                                                                                    | TE OF STATUS DESIRED (                                                                                   | X \$8.75 A                                                      | dditional Fee require<br>Certificate of Status                                                      |  |
| 7. Names a                                                                      | and Street Addresses of Each Officer and                                                                                                                                                                                            | /or Director (F                                                             |                                                                                                                              | prations must list at least treet Address of Eacl                                                   |                                                                                    |                                                                                                          | ·····                                                           |                                                                                                     |  |
| Title(s)                                                                        | itle(s) Name of Officers<br>and/or Directors<br>2                                                                                                                                                                                   |                                                                             | i i                                                                                                                          | Officer and/or Director                                                                             |                                                                                    | City / State / Zip                                                                                       |                                                                 |                                                                                                     |  |
| P/D                                                                             | CAMPBELL, RICHARI                                                                                                                                                                                                                   | ) F.                                                                        | 7614 Pennisular Drive Sarasota, FL 34231                                                                                     |                                                                                                     |                                                                                    | 34231                                                                                                    |                                                                 |                                                                                                     |  |
| VP/D                                                                            | BETTS, CHRISTOPHI                                                                                                                                                                                                                   | 1300 Ta                                                                     | 1300 Tangier Way                                                                                                             |                                                                                                     |                                                                                    | a, FL                                                                                                    | 34239                                                           |                                                                                                     |  |
| S/D                                                                             | CAMPBELL, CHRISTA H.                                                                                                                                                                                                                |                                                                             | 7614 Pennisular Drive                                                                                                        |                                                                                                     | Sarasot                                                                            | a, FL                                                                                                    | 34231                                                           |                                                                                                     |  |
| T/D                                                                             | BETTS, OTTILIE C. 130                                                                                                                                                                                                               |                                                                             | 1300 Ta                                                                                                                      | 1300 Tangier Way                                                                                    |                                                                                    | Sarasot                                                                                                  | a, FL                                                           | 34239                                                                                               |  |
|                                                                                 |                                                                                                                                                                                                                                     |                                                                             |                                                                                                                              |                                                                                                     | 7                                                                                  | 000020                                                                                                   | 7010                                                            | 1079<br>125004                                                                                      |  |
|                                                                                 | 8. Name and Address of Current                                                                                                                                                                                                      | gent                                                                        | 9. Name and Address of New Registered Agent                                                                                  |                                                                                                     |                                                                                    |                                                                                                          |                                                                 |                                                                                                     |  |
|                                                                                 | rd E. Nelson                                                                                                                                                                                                                        | -                                                                           |                                                                                                                              | Name                                                                                                |                                                                                    |                                                                                                          |                                                                 | <u>.</u>                                                                                            |  |
| 2070 Ringling Boulevard<br>Sarasota, FL 34237                                   |                                                                                                                                                                                                                                     |                                                                             |                                                                                                                              | Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.                              |                                                                                    |                                                                                                          |                                                                 |                                                                                                     |  |
|                                                                                 |                                                                                                                                                                                                                                     |                                                                             |                                                                                                                              | City                                                                                                |                                                                                    |                                                                                                          | State Zij                                                       | p Code                                                                                              |  |
| 10. I, being<br>Signature of<br>Registered A                                    |                                                                                                                                                                                                                                     | . he                                                                        | poration, am familiar                                                                                                        | with and accept the o                                                                               | bligations of Sect                                                                 |                                                                                                          | <u></u>                                                         |                                                                                                     |  |
| 11. Do<br>De                                                                    | es this corporation pay<br>pt. of Revenue under S.                                                                                                                                                                                  | any intan                                                                   | gible tax to t                                                                                                               | he<br>tutes. Yes                                                                                    | Ø №[                                                                               |                                                                                                          | ther side for                                                   | r information<br>9 tax.)                                                                            |  |
| 2. I do here<br>lease th<br>certify th<br>this rein<br>teas out                 | eby certify that the information supplied<br>e Division of Corporations from any liabi<br>nat I am an officer or director or the rece-<br>istatement application the reason for dis<br>ed by the corporation have been paid.<br>ath | with this filing i<br>ity of non-comp<br>iver or trustee<br>solution has be | s voluntarily furnished<br>bliance with Section 1<br>empowered to execu-<br>sen eliminated, the co-<br>indicated on this po- | d and does not qualify<br>19.07(3)(k) in the eve<br>te this application as<br>proprate name satisfi | y for the exemption<br>of that the inform<br>provided for in c<br>es the requireme | on stated in Section 111<br>nation supplied is deem<br>hapter 607 or 617, F.S<br>ints of section 607.040 | ).07(3)(k), F<br>ied exempt f<br>. I further ce<br>I or 617.040 | lorida Statutes. I re-<br>from public access. I<br>shift that when filing<br>51, F.S., and that all |  |

and the second s

RICHARD E. NELSON RICHARD L. SMITH F. STEVEN HERB OMER CAUSEY WILLIAM A. DOOLEY\* MICHAEL S. DREWS\*\*\* FREDERICK J. ELBRECHT\*\* GARY W. PEAL PHILLIP J. SYPULA

J. NEAL MOBLEY STEPHEN M. WALKER LAW OFFICES NELSON • HESSE 2070 Ringling Boulevard

Sarasota, Florida 34237

January 15, 1997

Telephone (941) 366-7550 Telefax (941) 955-3708 E-Mail: nelhess@ix.netcom.com

> ROBERT L. HESSE RETIRED \*Certified Modiator \*\*Board Certified Civil Thial Lawyer

Susiness Litization Lawren

\*\*\*Board Certified

Division of Corporations Reinstatement Section P. O. Box 6327 Tallahassee, Florida 32314

Re: Foamcraft, Inc. Document No. 434371

Gentlemen:

Enclosed is an Application for Reinstatement for Foamcraft, Inc., which was administratively dissolved on August 23, 1996 for failure to file an annual report.

We request that the \$585.00 reinstatement fee be waived, as the corporation never received the annual report form or reminder letters. The corporation has rented out its former corporate office and apparently there were some problems with the forwarding of the mail. We apologize for the inconvenience.

Enclosed is a check for \$373.75, as follows:

| 1996 annual fee       | \$ 200.00   |  |  |
|-----------------------|-------------|--|--|
| 1997 annual fee       | 165.00      |  |  |
| Certificate of status | <u>8.75</u> |  |  |
| Total:                | \$ 373.75   |  |  |

Thank you for your assistance.

Sincerely, J. Neal Moble

JNM/nkl enclosures