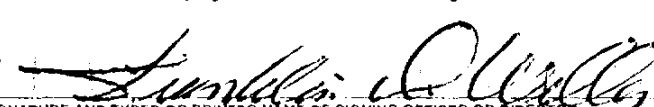


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 97 NOV -5 AM 10:54 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # 438401 1. Corporation Name GRECIAN POOL SERVICE, INC.					
Principal Place of Business 1617 DUNDEE ROAD WINTER HAVEN FL 33880 3125 TIGER CREEK FOREST LK. WALES, FL 33853		Mailing Address 1617 DUNDEE ROAD WINTER HAVEN FL 33880 ← SAME			
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip		3. New Mailing Office Address, If Applicable 3125 Tiger Creek Forest Suite, Apt. #, etc. LK. WALES, FL. City & State 33853 Zip Country POLK		4. Date Incorporated or Qualified To Do Business in Florida 10/18/1973 5. FEI Number 59-1492800 Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip		
P	WELLER, FRANKLIN	3125 TIGER CREEK FOREST	LAKEWALES FL		
			400002343514-8 -11/10/97--01166--009 ****165.00 ****165.00		
			6 11-7-97		
8. Name and Address of Current Registered Agent WELLER, FRANKLIN 3125 TIGER CREEK FOREST LAKE WALES FL 33853 MAILING			9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State FL Zip Code		
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 10/31/97 REGISTERED AGENT MUST SIGN					
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (See other side for information on intangible tax.)					
12. 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:  10/31/97 1-941-696-4441 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

CR2040 (8/97)

October 28, 1997

GRECIAN POOL SERVICE, INC.
3125 Tiger Creek Froest
Lakes Wales, FL 33853

(2)

DIVISION OF CORPORATIONS
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

To Whom it may concern,

I am writing this letter, and have enclosed payment, in order to reinstate my corporation (Grecian Pool Service, Inc.) per your instructions.

Thank you for your help and understanding in this awkward situation. As I explained to a member of your staff, Grecian Pool Service, Inc. has been in business for twenty-five years, and would not have purposely neglected to file our annual Corporation fee.

Per my conversation with one of your very courteous, and professional staff I feel the error was due to the change of my corporate address. Could you please make note of the address above and send all further correspondence to that address.

Again thank you for your help and prompt attention to this matter.

Sincerely,

Franklin Weller
President
file copy