## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## **APPLICATION** FOR REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

PALM CITY ELECTRIC, INC.

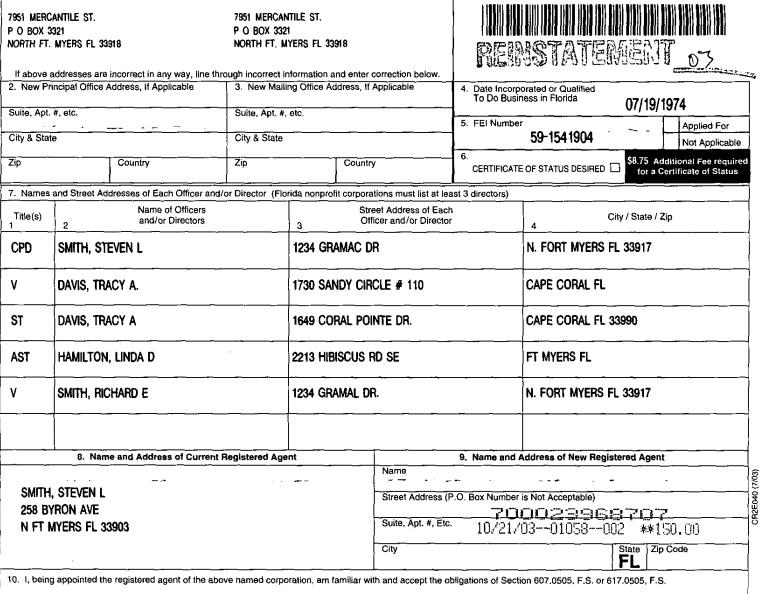
Principal Place of Business

Mailing Address

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



11. 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 of

REGISTERED AGENT MUST SIGN

10/16/63 (239)543-1523 Date Daytime Phone #



## PALM CITY ELECTRIC, INC.

October 16, 2003

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Document #457229

To Whom It May Concern:

I am in receipt of a Notice of Administrative Dissolution or Revocation for non-receipt of the 2003 UBR form. On April 11<sup>th</sup>, I mailed the UBR form along with \$150.00. To date the check has not cleared and I assume it has been lost.

Please accept the new form along with a new check for \$150.00.

Thank you for your consideration, and please feel free to contact myself at the number listed below.

Sincerely,

Tracy A. Davis
Vice President

Palm City Electric, Inc.

**UBR.doc**