

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

DOCUMENT # H89892

1. Corporation Name
KELLEY'S HEATING & AIR CONDITIONING COMPANY

2. Principal Office Address
11631-3 Columbia Park Dr. E.
Suite, Apt. #, etc.
City & State
Jacksonville, FL
Zip 32258 Country USA

3. Mailing Office Address
11631-3 Columbia Park Dr. E.
Suite, Apt. #, etc.
City & State
Jacksonville, FL
Zip 32258 Country USA

FILED
01 AUG 31 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7. Name and Address of Current Registered Agent

Name: Kenneth L. Kelley
Street Address (P.O. Box Number is Not Acceptable): 11631-3 Columbia Park Drive East
Suite, Apt. #, Etc.:
City: Jacksonville
State: FL Zip Code: 32258

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: *Kenneth L. Kelley* Date: 7/26/01
REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DP	Kenneth L. Kelley	12865 Longview Drive E.	Jacksonville, FL 32223
DV	Gloria P. Kelley	12865 Longview Drive E.	Jacksonville, FL 32223

10. 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: *Kenneth L. Kelley* Date: 7/26/01 Daytime Phone #: 904-268-5167
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KELLEY'S
heating &
air conditioning

202

July 26, 2001

Department of State
Division of Corporations
P. O. Box 6427
Tallahassee, FL 32314

RE: 2001 Corporate Return
Document #H89892

Dear Sir:

As my check number 1018 in the amount of \$150 dated March 22, 2001 for my corporate filing fee had never been received by my bank, I contacted your office. I was told my corporate report had been returned to me on April 22, 2001 as it was not signed.

I *never* received the returned report.

I am asking that you waive the reinstatement fee due at this time for reinstating our corporate business. Please review our payment and filing history and you will see our payments and filings have always been prompt and timely. Never have we filed a report before without the necessary signatures and I can assure you it will not happen again.

I have enclosed the completed Corporate Reinstatement and ask that you process it accordingly. If you, however, are going to require the reinstatement fee, please contact me and I will forward it immediately.

Thanking you in advance for your consideration on the above matter, I am

Sincerely,


GLORIA KELLEY
Vice President

GK:S
Enclosure