

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

316100

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

AND FILED

97 NOV 10 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # K80806

1. Corporation Name

MARCO ISLAND ELECTRIC CORPORATION

Principal Place of Business

741 FAIRLAWN CT
MARCO ISLAND FL 33937

Mailing Address

~~741 FAIRLAWN CT
MARCO ISLAND FL 33937~~



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

Country

3. New Mailing Office Address, If Applicable

~~KROUSCUP ELECTRIC
Suite, Apt. #, etc.
PO Box 261
City & State
PORTAGE WI
Zip 53901
Country USA.~~

4. Date Incorporated or Qualified To Do Business in Florida

04/17/1989

5. FEI Number

39-1642601

Applied for Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$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
STP	HOWELL, JAY	741 FAIRLAWN COURT	MARCO ISLAND FL
VP	HOWELL, JAY	741 FAIRLAWN COURT	MARCO ISLAND FL

600002345146--5
-11/12/97--01098--005
***165.00 ***165.00

11/10

8. Name and Address of Current Registered Agent

HOWELL, JAY
741 FAIRLAWN COURT
MARCO ISLAND FL 33937

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

REGISTERED AGENT MUST SIGN

Date

11/6/97

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes No

(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAY HOWELL

Date

11/6/97

Daytime Phone #

608-442-2222

CP2E040 (8/97)



**Krouscup
Electric Co.**

221 E. Albert Street
P.O. Box 261
Portage, Wisconsin 53901
(608) 742-2222

NOVEMBER 6, 1997

DIVISION OF CORPORATIONS
P O BOX 6327
TALLAHASSEE FL 32314

DEAR SIRs:

PLEASE BE ADVISED THAT THE FIRST TWO
REQUESTS WERE RETURNED BY THE POST OFFICE AS
NON-DELIVERABLE, HOWEVER THE REVOCATION
NOTICE WAS FORWARDED. PER ANDY OF YOUR
OFFICE I HAVE FILLED OUT THE FORM, CHANGED
THE MAILING ADDRESS AND INCLUDED \$165.00.

YOURS TRULY

A handwritten signature in black ink, appearing to read "JAY E. HOWELL". The signature is written in a cursive style with a horizontal line underneath.

JAY E. HOWELL