

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 21 AM 8:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P01000013200**

1. Corporation Name

THE KENNEDY & COMPANY, INC.

Principal Place of Business

Mailing Address

104 W REYNOLDS ST
SUITE 9
PLANT CITY FL 33506

104 W REYNOLDS ST
SUITE 9
PLANT CITY FL 33506

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

02/02/2001

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

Not Applicable

Zip Country Zip Country

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	4 City / State / Zip
CEOD	KENNEDY, ERIC V	3820 GULF BOULEVARD, SUITE 408	ST. PETE BEACH FL 33706
PD	KENNEDY, ADONNA L	3820 GULF BOULEVARD, SUITE 408	ST. PETE BEACH FL 33706

900023988529
10/21/03--01054--021 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KENNEDY, ERIC V
3820 GULF BOULEVARD
SUITE 408
ST. PETE BEACH FL 33706

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. or 617.0505, F.S.

Signature of Registered Agent

[Handwritten Signature]
REGISTERED AGENT MUST SIGN

Date **10/15/03**

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:

[Handwritten Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eric V. Kennedy
Date **10/15/03**

Daytime Phone # **813 759 2417**

CR2E040 (7/03)



October 15, 2003

To: Florida Department of State – Corporations

Re: KENNEDY & COMPANY FEI# 593705772


Subject: Reinstatement

To whom it may concern:

Please accept this application for reinstatement and our 2003 UBR Report. Apparently we did not receive prior reports that you may have sent.

Thank you in advance for your assistance in this matter.

Sincerely,



Eric V. Kennedy
C.E.O.

104 WEST REYNOLDS STREET, SUITE 9, PLANT CITY, FL 33563
813-759-2417