

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # P01000017959

1. Corporation Name
RICKARD'S PAINTING, INC.

2002 uBR

FILED
02 NOV -4 PM 4: 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
7345 CLEVELAND DRIVE
PUNTA GORDA FL 33982

Mailing Address
7345 CLEVELAND DRIVE
PUNTA GORDA FL 33982

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

Suite, Apt. #, etc.
City & State
Zip Country

4. Date Incorporated or Qualified To Do Business in Florida
02/16/2001

5. FEI Number
65-1076563

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	4 City / State / Zip
DPT	RICHARD, CONRAD V	7345 CLEVELAND DRIVE	PUNTA GORDA FL 33982
V	RICHARD, CONRAD V III	12435 MARYLAND AVE	PUNTA GORDA FL 33955
S	RICHARD, JUDY	7345 CLEVELAND DRIVE	PUNTA GORDA FL 33982

100008766481
11/04/02--01002--018 **150.00

8. Name and Address of Current Registered Agent
RICKARD, CONRAD V
7345 CLEVELAND DRIVE
PUNTA GORDA FL 33982

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. or 617.0505, F.S.

Signature of Registered Agent *Conrad V Rickard* REGISTERED AGENT MUST SIGN
Date 10/2/02

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: *Conrad V Rickard*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 10/2/02 Daytime Phone # 1-941-628-5040

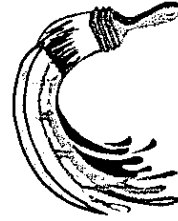
CR2E040 (8/02)

RICKARD'S PAINTING INC.

20fz

7345 Cleveland Drive
Punta Gorda, Fl. 33982
941 639-4226 office
941 628-5040 cell

October 27, 2002



State of Florida
Department of State

In ref; Document Number P010000117959

Sirs;

This is our first year of being Incorporated and was unaware of the filing of the Corporation papers until I received the NOTICE OF ADMINISTRATIVE DISSOLUTION OR REVOCATION. I called 1-850-245-6059 to find out what I needed to do to be reinstated. I was told by a Agent that I should have received notices before this one. I do not recall receiving any other notices in the ail until this one. I am enclosing the application , a check for \$150.00 and a letter which I was instructed to do.

I will be looking for a new application, which I was told should come to my address in the first part of next year.

Thank you for your help in resolving my problem.

Sincerely,


Conrad V Rickard Jr.

