

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P02000108008

1. Corporation Name

MCELROY'S SEAFOOD MARKET, INC.

Principal Place of Business

481-MERCERS FERNERY ROAD  
DELAND FL 32720

Mailing Address

481-MERCERS FERNERY ROAD  
DELAND FL 32720

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

33 Ocean DR. ~~Punta Gorda, FL~~

Suite, Apt. #, etc.

City & State  
Punta Gorda, FL

City & State

~~Same~~

Zip 33950      Country USA

Zip

Country



REINSTATEMENT 03

4. Date Incorporated or Qualified  
To Do Business in Florida

10/07/2002

5. FEI Number

51-0431030

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	MCELROY, DAWN	481-MERCERS FERNERY ROAD	DELAND FL 32720
DPS	MCELROY, Dawn	33 Ocean DRIVE	PUNTA GORDA FL
VP	MCELROY, Jeffery	33 Ocean DRIVE	PUNTA GORDA, 33950 FL
			400024896524 11/21/03 01004 007 **150.00

8. Name and Address of Current Registered Agent

MCELROY, DAWN  
481-MERCERS FERNERY ROAD  
DELAND FL 32720

9. Name and Address of New Registered Agent

Name Dawn MCELROY  
Street Address (P.O. Box Number is Not Acceptable)  
33 Ocean DRIVE  
Suite, Apt. #, Etc.  
City Punta Gorda      State FL      Zip Code 33950

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

REGISTERED AGENT MUST SIGN

Date

10/10/03

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)(l), 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.

#(941)628-6758

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

October 6, 2003

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

RE: McElroy's Seafood Market Inc., Doc number: P02000108008

Dear Sir,

Enclosed please find the form for Corporation Reinstatement and our check for \$150.00 for Annual Report Fee and Corporate Supplemental Fee.

Per our telephone conversation, the purpose of this letter is to inform you that our newly formed corporation (10/02) did not receive notification to file our Annual Business Report. We formed this corporation with the intention of operating a business in DeLand, Florida and were transferred to Punta Gorda before we opened our business. We moved in June, and did not receive any information at our prior address. Please re send any pertinent information regarding doing business in Florida to the following:

McElroy's Seafood Market, Inc.  
Dawn McElroy  
33 Ocean Drive  
Punta Gorda, Florida 33950

(941) 628-6758

If there is any further information required, please contact me at the above address. Thank you for your consideration.

Sincerely,  
*Dawn McElroy, President*  
Dawn McElroy  
McElroy's Seafood Market