


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION

FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 02 MAR 20 PM 12:19
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P92000004364
1. Corporation Name
 Rapase Development Co. Inc

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 ****308.75 ****308.75

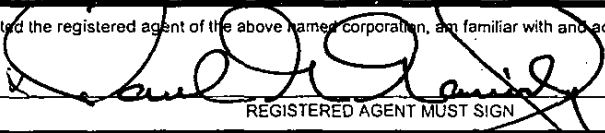
| | | | |
|---|--|--|--|
| 2. Principal Office Address 3399 Gulf Shore Blvd North Suite, Apt. #, etc. APT #307 City & State Naples FL Zip 33904 Country USA | | 3. Mailing Office Address 14 New Road Suite, Apt. #, etc. City & State Madison CT Zip 06443 Country USA | |
|---|--|--|--|

4. Date Incorporated or Qualified To Do Business in Florida 11-13-1992
5. FEI Number 65-0379274
 Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Paul G Garrity
 Street Address (P.O. Box Number is Not Acceptable): 3399 Gulf Shore Boulevard North
 Suite, Apt. #, Etc.: Apartment #307
 City: Naples
 State: FL Zip Code: 33904

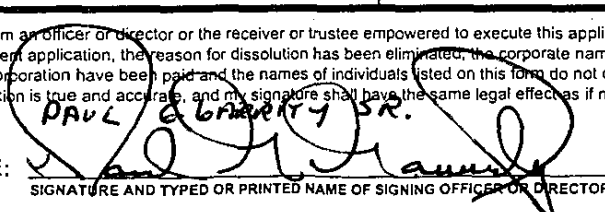
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: 
 Date: 3/10/2002
 REGISTERED AGENT MUST SIGN

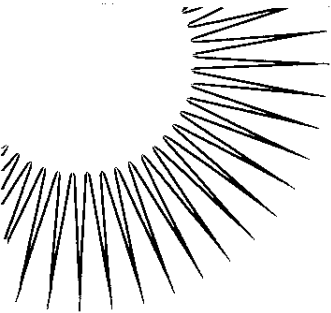
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|--------|-----------------------------------|--|--------------------|
| C | PAUL G. GARRITY, Sr. | 3399 Gulf Shore Blvd. | Naples, FL 33904 |
| P | NEVIN S. GARRITY | 72 Wickford Place | Madison CT 06443 |
| T | PAUL G. GARRITY, JR. | 16 Spinnaker Lane | Essex CT 06426 |
| S | SEAN R. GARRITY | 40 Neptune Ave | Madison CT 06443 |
| | | | 01-02 UBRYS |

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: 
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: PAUL G. GARRITY SR.
 Date: 3/10/2002
 Daytime Phone #: 800-245-8383

CR2E081 (9/01)



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GARRITY®

March 11, 2002

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

Dear Secretary's Office:

Please reinstate our Incorporation for Kepase Development Company, Inc. I have checked with the reinstatement department and they informed me that our registration for Kepase was returned as undeliverable.

I have enclosed the \$300 fee for the two years plus \$8.75 for a copy of the Certificate of Incorporation. Please send the certificate to my attention at 14 New Road, Madison, CT 06437.

Thank you for your assistance.

Sincerely,

Arthur G. Aery, Jr.
Kepase Controller

Enclosure