PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P9200000613

1. Corporation Name

J.R.I. AND ASSOCIATES, INC.

Principal	Place of	Business
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Mailing Address

12811 KENWOOD LN

12811 KENWOOD LN

STF 218 FORT MYERS FL 33907

Suite, Apt. #, etc.

US

STE 218 FORT MYERS FL 33907

Suite, Apt. #, etc.

1.281-1-KENWOOD-LN-

US

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

800012779638 02/19/03--01022--001 **150.00 4. Date Incorporated or Qualified

FILED

03 FEB -4 AM 10: 56

SECRETARY OF STATE TALLAHASSEE, FLORIDA

- -- 11/19/1992-

To Do Business in Florida FEI Number

ed For pplicable

CR2E040 (8/02)

e required Status

ste 116 ste 1		<u>ste 11</u>	6	5. FEI Numbe			Appli
City & State		City & State	City & State		65-0369063	- ⊢	1 yppii
F1	Γ <u>. MYERS</u> , FL	FT MV	ERS., FL			1	Not A
Zip 3.3	Country US	33907	Country	6.: CERTIFICATI		75 Addit	
	and Street Addresses of Each Officer and			F		or a Cert	ificate o
Title(s)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director	1	City / Sta	ate / Zip	
P	SELPH, MICHAEL C	ELPH, MICHAEL C 849 A COURTINGTON		,	FORT MYERS FL 33919		
					00127796 :		
		ł		02/19/	0301022002	** ISO	0.00

12811 KENWOOD LN.

8. Name and Address of Current Registered Agent	Q. Namo and Address of New Parish			
SELPH, MICHAEL C 4619 S.W. 6TH AVENUE	9. Name and Address of New Registered Agent Name SELPH, MICHAEL C Street Address (P.O. Box Number is Not Acceptable) 849 A COURTINGTON LN			
CAPE CORAL FL 33914	Suite Apt. # Etc. City FT. MYERS State Zip Code F1 33919			

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 Agen

REGISTERED AGENT MUST SIGN

10-24-02

19. 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:



33919



JP I & ASSOCIATES, INC. LAND SURVEYORS and MAPPERS

THE FLORIDA
SOCIETY
of
PROFESSIONAL
LAND SURVEYORS
FOUNDED

December 30, 2002

RE: Waiver of reinstatement fee,
---FEI-#65-0369063

To Whom It May Concern:

This letter is to inform you that we did not receive the two prior uniform business report (UBR) notices. We have enclosing the completed application for reinstatement, the appropriate UBR filing fees and this letter. Thank you for your consideration.

Sincerely,

JRI & Associates

Michael C. Selph, President

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