


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT 2001 UBR		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P93000066569			
1. Corporation Name The NEFCO Management Corporation			
2. Principal Office Address 4362 Northlake Blvd Suite, Apt. #, etc. Suite 213 City & State Palm Beach Gardens, FL Zip 33410		3. Mailing Office Address 4362 Northlake Blvd Suite, Apt. #, etc. Suite 213 City & State Palm Beach Gardens, FL Zip 33410	
Country USA		Country USA	

10/2
FILED
01 OCT 30 AM 8:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

400004689944--5
-11/20/01--01078--014
****150.00 ****150.00

4. Date Incorporated or Qualified To Do Business in Florida 09/24/1993	
5. FEI Number 65-0437930	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

2001 UBR jhm

7. Name and Address of Current Registered Agent		
Name Elaine Schaller		
Street Address (P.O. Box Number is Not Acceptable) 114 Windsor Pointe Drive		
Suite, Apt. #, Etc.		
City Palm Beach Gardens	State FL	Zip Code 33418

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 Elaine Schaller Date 10/29/01
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
PSCD	Earle Schaller	114 Windsor Pointe Drive	Palm Beach Gardens, FL 33418
VTD	Elaine Schaller	114 Windsor Pointe Drive	Palm Beach Gardens, FL 33418

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: Earle Schaller **Earle Schaller** 10/29/01 561-775-9303
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

2012

The NEFCO Management Corporation
4362 Northlake Boulevard
Suite 213
Palm Beach gardens, FL 33410

October 29, 2001

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Subject: Application for Reinstatement of the NEFCO Management Corporation

Dear Division of Corporations

Enclosed please find an Application for Reinstatement for The NEFCO Management Corporation. We just learned that the corporation was moved to inactive status in September of this year for failure to file the 2001 Annual Report. Please be advised that we never received the report filing notice for this period, although we did receive and file the report for the sister corporation, NEFCO, Incorporated.

Enclosed please find the Application for Reinstatement and a check in the amount of \$150.00 which is the standard filing fee.

Thank you for your attention to this matter.

Sincerely,


Earle Schaller, President
ES/er