

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 OCT 24 PM 12:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P96000031941

1. Corporation Name
CLARY CONSTRUCTION COMPANY

Principal Place of Business
220 INTERSTATE CT
PALM BAY FL 32909
US

Mailing Address
220 INTERSTATE CT
PALM BAY FL 32909
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		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04/08/1996	
City & State		City & State		5. FEI Number	
Zip		Country		59-3384695	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PTD	CLARY, STEPHEN A	220 INTERSTATE CT	PALM BAY FL 32909
VP	CLARY, CHARLES W	220 INTERSTATE CT	PALM BAY FL 32909
S	WHITE, RENEE A	220 INTERSTATE CT	PALM BAY FL 32909
			800008568338 10/24/02--01063--009 **150.00
			800008568338 10/24/02--01063--010 **8.75

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
CLARY, STEPHEN A 720 MONTCLAIR ROAD, N.E. PALM BAY FL 32905		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 *[Signature]* **SIGNATURE REQUIRED** Date 10-21-02
REGISTERED AGENT MUST SIGN

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.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED** Date 10-24-02 321 Daytime Phone # 952-0945
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2040 (8/02)



220 Interstate Court Palm Bay, Florida 32909

Office 321-952-0945 • Facsimile 321-952-6461
Clary220@aol.com

October 21, 2002

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

RE: Uniform Business Report Notices
Clary Construction Company
59-3384695
Document #: P96000031941

To: Whom it may concern,

I hereby declare that I did not receive either of the two annual report notices informing me of possible dissolution or revocation of the corporation in the 2002 calendar year.

Please reinstate the above-referenced corporation to "active status" as soon as possible.

Thank you.

Sincerely,

A handwritten signature in black ink, appearing to read 'SA Clary', is written over the typed name.

Stephen A. Clary
President
Registered Agent