

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/08/1996

5. FEI Number

59-3384695

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
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

CLARY, STEPHEN A
720 MONTCLAIR ROAD, N.E.
PALM BAY FL 32905

9. Name and Address of New Registered Agent

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 REQUIRED

REGISTERED AGENT MUST SIGN

Date

10.21.02

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)(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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10.24.02

321

952-0945

Daytime Phone #

CR2E040 (9/02)



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