

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 NOV 23 PM 1:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000063335

1. Corporation Name

FERKEL, INC.

Principal Place of Business

1930 Hillview Street
Sarasota, FL 34239

Mailing Address

P.O. Box 35286
Sarasota, FL 34242

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

200002698552--1
-12/01/98--01028--006
****750.00 ****750.00

2. New Principal Office Address, if Applicable		3. New Mailing Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida 07-26-96	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 01-5546104	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input 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 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D/P/T	Gray, Leslie	1280 Northport Dr.	Sarasota, FL 34242
D/V/S	Kelly, Charles	9105 Midnight Pass Rd	Sarasota, FL 34242

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8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
Robert W. Browning, Jr. 1800 Second Street Suite 755 Sarasota, FL 34236		Name Leslie Gray Street Address (P.O. Box Number is Not Acceptable) 1930 Hillview Street Suite, Apt. #, Etc.	
		City Sarasota	State FL
		Zip Code 34239	

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.

Signature of Registered Agent Leslie W Gray Date 11-18-98
REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on Intangible tax.)

12. 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: Leslie W Gray Leslie Gray President 11-18-98 941-346-0991
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2ED00 (1/98)