

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 JAN 25 PM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P98000065360**

1. Corporation Name
Home Systems, Inc.

Principal Place of Business 7491 Conroy-Windermere Rd. Suite 1 Orlando, FL 32835	Mailing Address 7491 Conroy-Windermere Rd Suite 1 Orlando, FL 32835
--	---

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

2. New Principal Office Address, If Applicable 103 Drennen Road Suite, Apt. #, etc.	3. New Mailing Office Address, If Applicable 103 Drennen Road Suite, Apt. #, etc.	4. Date Incorporated or Qualified To Do Business in Florida 7-24-98
City & State Orlando, Florida	City & State Orlando, Florida	5. FEI Number 59-3527575
Zip 32806	Country USA	Country USA

Applied For	Not Applicable
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
P,D	Dennis P. Quinn	3523 Oak Lake Drive	Kingwood, TX 77339
VP	Daniel G. Quinn	103 Drennen Road	Orlando, FL 32806
			300003118709--0 -02/01/00--01096--005 ****900.00 ****900.00
REINSTATEMENT 99.00 11TS			

8. Name and Address of Current Registered Agent Dennis P. Quinn 7491 Conroy-Windermere Road Suite 1 Orlando, FL 32835	9. Name and Address of New Registered Agent Name Daniel G. Quinn Street Address (P.O. Box Number is Not Acceptable) 103 Drennen Road Suite, Apt. #, Etc. City Orlando State FL Zip Code 32806
---	---

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: REGISTERED AGENT MUST SIGN Date **1-12-00**

11. This corporation owes 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 of 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: **1-12-00** **407-856-5556**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (12/98)