

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1002

APPLICATION FOR REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 Catherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

DOCUMENT # P99000078947

01 FEB 28 AM 11:24

1. Corporation Name
FATHERLAND MARKETING, INC.

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business 1801 ANASTASIA WAY SOUTH ST. PETERSBURG FL 33712	Mailing Address 1801 ANASTASIA WAY SOUTH ST. PETERSBURG FL 33712
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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 09/03/1999
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. FEI Number Applied for <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
City & State	City & State	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status
Zip	Country	

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	4 City / State / Zip
PD	DAVIS, CLARENCE E SR.	1801 ANASTASIA WAY SOUTH	ST. PETERSBURG FL 33712
SD	DAVIS, ADA B	1801 ANASTASIA WAY SOUTH	ST. PETERSBURG FL 33712
D	JOHNSON, BARBARA	108 UNION ST.	TAMPA FL 33605
D	DAVIS, PRENTISS A	108 UNION ST.	TAMPA FL 33605
D	DAVIS, FRANCIS S	108 UNION ST.	TAMPA FL 33605
D	DAVIS, BENNIE	1801 ANASTASIA WAY SOUTH	ST. PETERSBURG FL 33712

8. Name and Address of Current Registered Agent DAVIS, CLARENCE E SR. 1801 ANASTASIA WAY SOUTH ST. PETERSBURG FL 33712	9. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City 800003818598--1 -03708701 State 028-039 ***300, FL ***300,00
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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: *Clarence E. Davis* REGISTERED AGENT MUST SIGN
 Date: 2-10-2001

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: *Clarence E. Davis*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: 2-10-2001
 Daytime Phone #: (927) 867-5709

CR2E040 (8/00)

2002

FATHERLAND MARKETING, INC.

1801 Anastasia Way South
St. Petersburg, FL 33712

December 30, 2000

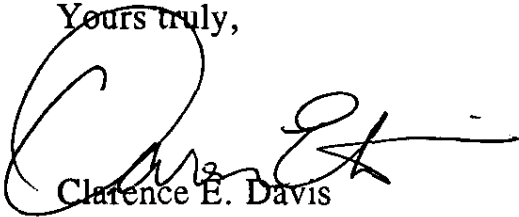
Florida Department of State
Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
~~Tallahassee, FL 32314-6327~~

Dear Sir:

I am writing this letter for the purpose to ask for a one-time exemption. I did not receive a notice of renewal of my company. I am aware that this is not an acceptable excuse, however, this is the only one I have.

Please grant me this one-time exemption and I will never be late again.

Yours truly,



Clarence E. Davis
President