PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	PORATI STATEM	5 E 1 5 1 4 7 6 1		ecretary	MENT C of State			06 N	FILED 0 v 20 P M			
DOCUMENT # P99000101462 1. Corporation Name								MERITAGI OF STATE TALLAHASSEE, FLORIDA				
FIELD DATA SURVEYORS, INC.							900081960909 11/20/0601074019 **750.00					
2. Principal 4531	Office Addre	nity Trail	3. Mailing Office Address 4531 Serenity Trail			CR2E081 (12/05) 02-06						
Suite, Apt. #,			Suite, Apt. #, etc.			Date Incorporated or Qualified To Do Business in Florida						
Palm Harbor, Fl			Palm Harbor, FI]	5. EST Number 609985 Applied For Not Applicable					
3468	685 Country		34685		Country		CERTIFICATE OF STATUS DESIRED S8.75 Addition for a Certification				al Fee required ate of Status	
7. Name and Address of Current Registered Agent												
	່ງໃoຶseph Hagerty, III											
	Sire Address C. Box Number is Not Appentable) 4531 Serenity trail										-	
											_	
	Suite, Apt. #, Etc.											
	Paln	n Harbor						State FL	34685			
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent Date 11-15-06												
Registered Agent												
9. Names	and Street A	ddresses of Each Officer and	or Director (Flor	ida nonpro	fit corporation	ns must list at	least 3 directors)					
Titles	Name of Officers and/or Directors			Street Address of Each Officer and/or Director				City / State / Zip				
PD	Joseph Hagerty III			4531 Serenity Trail		Γrail	Palm Harbor, FI 34685					
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10. 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 filling 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 fisted on this form do not qualify for an exemption contained in Chapter 119, 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: 11-15-06 727-641-6966												
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #												

Field Data Surveyors, Inc. 4531 Serenity Trail Palm Harbor, Fl 34685

November 13, 2006

Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314-6327

RE: Corporate Reinstatement, Document #P99000101462

Joseph Hogery II

Dear Sir/Madam:

Enclosed find our Corporate Reinstatement for the above referenced. I do not recall receiving the notice or report for the year 2002. I am enclosing the \$750.00 reinstatement fee.

Sincerely,

Joseph Hagerty III

President