

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -3 AM 9:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F02000006035

1. Corporation Name

CONVEYCO MFG. CO.

Principal Place of Business

Mailing Address

15151 S.E. INDUSTRIAL AVENUE
CLACKAMAS OR 97015

15151 S.E. INDUSTRIAL AVENUE
CLACKAMAS OR 97015

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

12/05/2002

5. FEI Number

91-1036581

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
CPS	GIBB, ROBERT B	15151 S.E. INDUSTRIAL AVENUE	CLACKAMAS OR 97015
DV	GIBB, ROBERT A JR	15151 S.E. INDUSTRIAL AVENUE	CLACKAMAS OR 97015

800024377078
11/03/03--01045--010 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE FL 32301

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

Date

REGISTERED AGENT MUST SIGN

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:

Robert B. Gibb - President Oct. 24, 2003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

503 664-1158

CR2E040 (7/03)



Conveyco Mfg. Co.
15151 SE Industrial Avenue
Clackamas, Oregon 97015
Phone 503-657-1158
Fax 503-656-7549

October 16, 2003

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

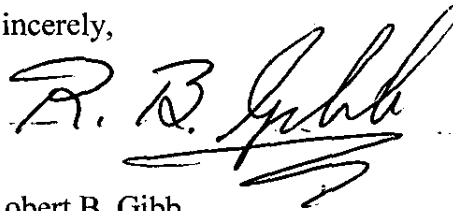
RE: Conveyco Mfg. Co.
Request for Waiver of Reinstatement Fees

Dear Madam or Sir:


This letter will confirm that Conveyco Mfg. Co. did not receive the two Uniform Business Reports apparently sent by the Florida Division of Corporations earlier this year. Accordingly, pursuant to Florida procedure, Conveyco Mfg. Co. hereby requests that the Florida Division of Corporations waive any and all applicable reinstatement fees. This letter is being submitted with an Application for Reinstatement and the appropriate filing fees.

Please refer any questions with regard to this matter to the corporation's legal counsel, Michael D. Walker, at (503) 226-2966.

Sincerely,



Robert B. Gibb
President

 **Samuels Yoelin Kantor
Seymour & Spinrad LLP**
Attorneys At Law

Hy Samuels (1904-1992)

Amy E. Bilyeu ⁵
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Steven W. Seymour ³
Edward L. "Ted" Simpson ^{3,5}
Alan M. Spinrad
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Van M. White III ³
Merritt S. Yoelin, P.C. ^{1,4}

October 31, 2003

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4640 SW Macadam Ave.
Portland, OR 97239-4232

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1. Admitted in California
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 3. Admitted in Washington
 4. C.P.A. (Colorado)
 5. LLM in Taxation
 6. Of Counsel
- [Direct E-Mail
mdw@SamuelsLaw.com](mailto:mdw@SamuelsLaw.com)

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

**RE: Conveyco Mfg. Co.
Application for Reinstatement
Document No. F02000006035**

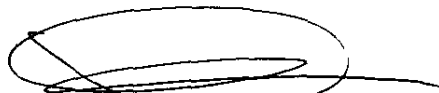
Dear Madam or Sir:

On behalf of Conveyco Mfg. Co., I am enclosing the Florida Application for Reinstatement, the regular annual corporate fee of \$150, and a request for waiver of reinstatement fees signed by the president of Conveyco Mfg. Co.

As you will note, pursuant to the request for waiver letter, Conveyco Mfg. Co. did not receive the two uniform business reports apparently sent by the Florida Division of Corporations earlier this year. Accordingly, this letter requests that the Florida Division of Corporations waive any and all applicable reinstatement fees.

Please contact me if you have any questions or if I can be of further assistance in this regard.

Sincerely,



Michael D. Walker

MDW/kat O:\2\2179-1\1030FL ltr.doc

Enclosure

cc: Robert B. Gibb (w/encl)
Martin Carrabine (w/encl)