


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

lgr

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 JUN 14 PM 11:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #
1. Corporation Name
New Tampa Wildcats-Greater Tampa, Inc.
8710 Hidden Green Lane
P.O. Box 47116

100037942771
06/14/04--01060--009 **I22.50

2. Principal Office Address 8710 Hidden Green Lane Suite, Apt. #, etc.		3. Mailing Office Address P.O. Box 47116 Suite, Apt. #, etc.	
City & State Tampa, Florida		City & State Tampa, Florida	
Zip 33647	Country USA	Zip 33647	Country USA

4. Date Incorporated or Qualified To Do Business in Florida May 21, 2002

5. FEI Number 59-3632391	Applied For <input type="checkbox"/>
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$0.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name
Stephen M. Kovach

Street Address (P.O. Box Number is Not Acceptable)
8710 Hidden Green Lane

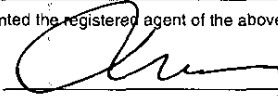
Suite, Apt. #, Etc.

City
Tampa

State
FL

Zip Code
33647

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.

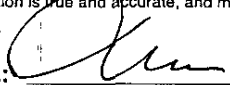
Signature of Registered Agent  Date 6/9/04

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Jerry Cionci	P.O. Box 47116	Tampa, FL 33647
S	Pat Morris	P.O. Box 47116	Tampa, FL 33647
T	Stephen M. Kovach	P.O. Box 47116	Tampa, FL 33647

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 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:  **STEPHEN M. KOVACH** Date 6/9/04 Daytime Phone # 813 404-4436

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (01/04)

DRUMMOND & ASSOCIATES

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June 5, 2004

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

Re: Document No. N02000003904

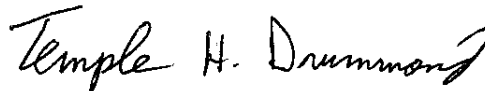
Dear Sir/Madam:

Enclosed is the Limited Liability Partnership Reinstatement for New Tampa Wildcats-Greater Tampa, Inc., along with their check in the amount of \$122.50 (\$61.25 each for the filing fees for 2003 and 2004). We respectfully request that you waive the reinstatement fee.

Our client has not received any notifications from the Department of State in connection with its Corporation Annual Report and/or administrative revocation. This may be due to a change of address for the registered agent as well as changes in the officers for this non-profit entity.

Please call if you have any questions or if I can be of further assistance in this matter. Thank you for your assistance.

Sincerely,



Temple H. Drummond

Enclosures

cc: Mr. Stephen M. Kovach