

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N17037

1. Corporation Name

Walton Youth Athletics, Inc.

FILED
02 JUN 13 PM 12:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Office Address

175 Cloud Drive

Suite, Apt. #, etc.

3. Mailing Office Address

PO Box 115

Suite, Apt. #, etc.

City & State

De Funiak Springs, FL

City & State

Mossy Head, FL

Zip

32433

Country

Walton

Zip

32434

Country

Walton

4. Date Incorporated or Qualified To Do Business in Florida

9-24-86

5. FEI Number

75-3058408

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

200006052772--8

Name

Florence Lamb

Street Address (P.O. Box Number is Not Acceptable)

175 Cloud Drive

Suite, Apt. #, Etc.

City

De Funiak Springs

State
FL

Zip Code

32433

05/26/02--01084--001
10.00-AR
8.75-Cert
131.25

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

Florence Lamb

REGISTERED AGENT MUST SIGN

Date

5-28-02

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
PO	Frankie Lamb	175 Cloud Drive	De Funiak Spgs, FL 32433
V-PO	Pam Daniel	840 German Club Rd	De Funiak Spgs, FL 32433
T	Patricia Jackson	1465 Laird Rd	Mossy Head, FL 32434
S	Florence Lamb	175 Cloud Drive	De Funiak Spgs, FL 32433
		01-02 4BR	

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:

Florence Lamb

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/28/02

Daytime Phone #

CR2081 (9/01)

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Walton County Youth Athletic League, Inc.

175 Cloud Drive
De Funiak Springs, FL 32433
850-892-3183

May 28, 2002

Division of Corporations -
PO Box 6327
Tallahassee, Florida 32314

Re: Document N17037

We are sending you this correspondence in regards to waiving the reinstatement fee of \$175.00. There has been numerous board changes in the last several years and they have failed to pass along the information and necessary documents to maintain current status. The current board members for 2001 and 2002 were unaware of the necessary documents for reinstatement and annual report.

The registered agent Susan Mc Combs has not been with the league for the last two years and she did not forward any pertinent information to the board. We were unaware that the prior president for the last two years did not follow up on making sure the paperwork was completed in a timely manner. We received the paperwork and only after calling, found out that the league was dissolved.

This year's board members are restructuring the league and trying to assure that it will be kept current. I, the new registered agent Florence Lamb will do my best to properly maintain a current status or make sure that the league is aware of necessary annual procedures.

We appreciate your consideration in this matter.

Sincerely,

*per conversation with Pam Daniel
on 6/19/02 at 2:40 p.m. Add D beside
Frankie Lamb + Pam Daniel*