

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
97 FEB 26 AM 10:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000087194

1. Corporation Name
40+ GOLF, INC.

Principal Place of Business
118 W. ORANGE STREET
ALTAMONTE SPRINGS, FL 32714
Mailing Address
c/o A-PLUS ACCOUNTING
118 W. ORANGE STREET
ALATMONTE SPRINGS, FL 32714

Number was issued incorrect in 1994 - This number 59-3285297 is correct. S.L.

2. New Principal Office Address, If Applicable
3. New Mailing Office Address, If Applicable
4. Date Incorporated or Qualified To Do Business in Florida 12/1/94
5. FEI Number 59-3285297
6. CERTIFICATE OF STATUS DESIRED [X] \$8.75 Additional Fee required for a Certificate of Status

Table with 4 columns: Title(s), Name of Officers and/or Directors, Street Address of Each Officer and/or Director, City / State / Zip. Includes entries for JAMES L. BARFIELD and LORETTA A. STURGILL.

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-03/03/97--01005--012
****923.75 ****923.75

REINSTATEMENT 1/6-97

8. Name and Address of Current Registered Agent
STURGILL, LORETTA A.
459 DENTON COURT
HEATHROW, FL 32746
9. Name and Address of New Registered Agent

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: Loretta A. Sturgill
Date: 2/25/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes [] No []

12. 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: Loretta A. Sturgill LORETTA A. STURGILL, PRES. FEB. 25, 1997 (407) 682-4242
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (12/96)