

JUL-12-2000 11:38  
**APPLICATION FOR REINSTATEMENT**



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

561 394-3862 P.03/03  
 FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 00 JUL 12 PM 1:12

**DOCUMENT # 205908**

1. Corporation Name

**Crossroads Bowling Lanes, Inc.**

Principal Place of Business

Mailing Address

**10400 Florida Avenue  
 Tampa, Florida 33612**

**REINSTATEMENT 99-00**

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  
**Crossroads Bowling Lanes, Inc.**

4. Date Incorporated or Qualified to Do Business in Florida **9/14/57**

Suite, Apt. #, etc

Suite, Apt. #, etc.

5. FEI Number  
**16-0834319**

Applied For

City & State

City & State  
**Amherst, NY 14226**

Not Applicable

Zip

Country

Zip

Country

**14226**

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres. & Dir.	<b>Terrence L. Dobbins</b>	<b>8205 Clarherst Drive</b>	<b>East Amherst, N.Y. 14051</b>
V.Pres./ Secy. & Dir.	<b>Edward J. Wodjeski</b>	<b>1478 North French Road</b>	<b>Amherst, N.Y. 14226</b>

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**Jack Gellman  
 800 N.E. 195th Street  
 N. Miami Beach, FL**

Name  
**HRWG Corp.**  
 Street Address (P.O. Box Number is Not Acceptable)  
**2000 Glades Road, Suite 400**  
 Suite, Apt. #, Etc.  
 City  
**Boca Raton** State **FL** Zip Code **33431**

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

BY: **Larry Gorman, Vice President** MUST SIGN

Date **July 11, 2000**

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

(See other side for information on intangible tax.)

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)(j), 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:

**Edward J. Wodjeski**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**Edward J. Wodjeski, V.Pres.**

**7/12/00**

Date

**716 / 833-4934**

Daytime Phone #

Florida Department of State  
Division of Corporations  
Public Access System  
Katherine Harris, Secretary of State

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To: Division of Corporations  
Fax Number : (850) 922-4004

From: Account Name : HODGSON, RUSS, ANDREWS, ET AL  
Account Number : 072720000242  
Phone : (561) 394-0500  
Fax Number : (561) 394-3862

CORPORATION REINSTATEMENT

CROSSROADS BOWLING LANES, INC.

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$908.75

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