| · · · | | San • Se | EPARTME Idra B. Mo ecretary of \$ | NT OF STATE rtham State | | APPROVED AND FILED | C |
|--|--|--|--|--|-------------------------------------|--|--|
| DOCU 1. Corpora | JMENT # 70098 | | ON OF CORPO | RATIONS | | 1997 DEC 10 PN SECRETARY OF S TALLAHASSEE.FL | |
| | DLA PLAYERS, INC. | | | | | 00002376 -12/17/97 | 0087 |
| • | | Malling Address 2411 E. IRLO BRO P.O. BOX 420861 KISSIMMEE FL 347 | | | | | |
| 2. New Prin | ddresses are incorrect in any way, line thro ncipal Office Address, If Applicable #.etc. G. TRLO BRENSON Howy | ugh incorrect inform 3. New Mailing Oi Suite, Apt. #, etc. | | | | | /19/1960 |
| Civil State, Cissimmee, FL 2134744 Oscola | | City & State Zip Country | | у | 6. 59-6179937 Not Ap | | 5 Additional Fee require or a Certificate of Status |
| and the second | and Street Addresses of Each Officer and/c Name of Officers and/or Directors | | Str | eet Address of Each ficer and/or Director | st 3 directors) | City / Sta | |
| | REICH, M.J. | 3 410 / 8 | 3 (Do NOT Use Post Office Box Numbers) 410 GART COURT 1847 BRAM 6 LEWOOD | | | POINCIANA FL- St-Cloud. FL 34769 | |
| | ECK, GAIL | L | 1674 BRAMBLEWOOD DRIVE- 410 Cart Caurt | | | ST. CLOUD FL- Kissimmee, FL 34759 | |
| | BARRY, Bevenly Briven, Bevenly Briven, Noreen | | 1612 OSCEOLA PARK DRIVE . 1611 W. Oak Strect 818 CARDINAL WAY. | | | Kissimmer, FL 34741 Kissimmer, FL 34741 | |
| | B. Name and Address of Current R | | 920 7 | -rlo Dru | | kissimmee, | 19007 |
| -ECK; GAIL | | | | 9. Name and Address of New Registered Agent Name Reich, M. J. Street Address (P.O. Box Number, is Not Acceptable) I&47 Bramble. wood Drive Suite, Apt. #, Etc. Citype State Zip Code | | | |
| | Agen1 | e name) corporation | n, am familiar wi | th and accept the ob | OUC ligations of Secti | on 607.0505, F.S. Dale(2/2/91 | 34769 |
| | s corporation owes or ha angible Personal Property | | | ar Yes 🗌 | No 🗌 | | e for information gible tax.) |
| this reins owed by | that I am an officer or director or the receive statement application, the reason for dissolu- the corporation have been paid and the na oplication is true and accurate, and my sign | ition has been elimir imes of individuals li | nated, the corpo isted on this form | rate name satisfies t n do not qualify for a | he requirements in exemption und | of section 607.0401 or 617.040 | 01. F.S. that all fees |
| SIGNAT | URE: Benefit I | A. Barry | 1 | | | 19.19.197 Date Day | |

December, 2, 1997

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Osceola Players, Inc. 2411 E. Irlo Bronson Highway P O Box 420861 Kissimmee,FL 34742-0861

To Whom It May Concern:

The application for reinstatement, Document 700986, first submitted on April 30,1997. Since then it has been returned twice for corrections. The last time it was returned in June of 1997and sent back, it was not received by your office. Therefore we have received this administrative dissolution or revocation form.

I telephoned in and spoke with Leslie on NOvember 18, 1997, and she suggested we resubmit the application with the necrossary changes and also submit another check for the \$61,25 renewal fee, which is enclosed.

If any further steps are necessary to complete this application, please let us know.

Sincerely,

Bennly A. Barry

Beverly A, Barry Treasurer Osceola Players, Inc.