

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED  
AND  
FILED

APPLICATION  
FOR  
REINSTATEMENT



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

98 JUN 10 AM 9:37

DOCUMENT #

700992

1. Corporation Name

SEMINOLE BASEBALL, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

S.R. 419  
WINTER SPRINGS, FL  
32708

Mailing Address

P.O. BOX 190662  
CASSELBERRY, FL  
32718-0662

000002560840--7  
-06/16/98--01064--024  
\*\*\*\*\*8.75 \*\*\*\*\*8.75

000002560840--7  
-06/16/98--01064--025  
\*\*\*\*\*542.50 \*\*\*\*\*452.50

~~6998-9480~~

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

4. Date Incorporated or Qualified To Do Business in Florida

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

59-2721180

Not Applicable

Zip

Country

Zip

Country

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        | 2                                 | 3   | 4                        |
|----------|-----------------------------------|---|--------------------------|
| Title(s) | Name of Officers and/or Directors | Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) | City / State / Zip       |
| P        | ED SUGGS                          | 111 E. FLOYD AVE  | LAKE MARY, FL 32746      |
| VP       | FRANK BAKER                       | 209 S. EDGEEMON AV.   | WINTER SPRINGS, FL 32708 |
| VP       | CARMINE PETRACCA                  | 116 HIDDEN LAKE DR.   | SAWFORD, FL 32773        |
| T        | LOUIS ZALTSBERG                   | 1626 EAGLE NEST CIR.  | WINTER SPRINGS, FL 32708 |
| S        | PAULA CROOKE                      | 725 LAKE SIDE DR.   | WINTER SPRINGS, FL 32708 |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ROBERT L. JOHNSON  
117 CARRIAGE HILL DR.  
CASSELBERRY, FL.  
32707

FRANK BAKER  
Street Address (P.O. Box Number is Not Acceptable)  
209 S. EDGEEMON AV.  
Suite, Apt. #, Etc.

City: WINTER SPRINGS State: FL Zip Code: 32708

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

*[Signature]* DIRECTOR  
REGISTERED AGENT MUST SIGN

Date: 04-22-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

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)(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:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LOUIS M. ZALTSBERG

Date

4/23/98

Daytime Phone #

407-281-5280

CR2E040 (1-98)