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
98 JUL 27 PM 3:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 723115

1. Corporation Name
Lakewood Junior Football Ass., Inc.

Principal Place of Business
2001 Country Club Way So.
St Pete, Fl. 33712

Mailing Address
P.O. Box 530083
St. Pete, Fl.
33747

REINSTATEMENT 89-98

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip | Country

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip | Country

4. Date Incorporated or Qualified To Do Business in Florida 4/72

5. FEI Number 59-1844501 ☐ Applied For ☐ Not Applicable

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	Derrick Pollock	6494 A Lynn Lake Dr So.	St. Pete, Fl. 33712
Sec	Sherry Oliver	714-61 Ave. So.	St. Pete, Fl. 33705
Treas	Marvaree Hyatt	655 Alcazar Way So.	St. Pete, Fl. 33705

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-07/29/98--01088--027
****787.50 ****787.50

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent
Name: Derrick Pollock
Street Address (P.O. Box Number is Not Acceptable): 6494 Lynn Lake Dr. So.
Suite, Apt. #, Etc.: A
City: St Pete | State: FL | Zip Code: 33712

CR2E040 (1-98)

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: D. Pollock
REGISTERED AGENT MUST SIGN

Date: 7-20-98
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-07/29/98--01088--028
******8.75

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: D. Pollock / Derrick Pollock 7-20-98 (813) 906-8405
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #