

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

737329

1. Corporation Name

Sport Boosters, Inc.

FILED

99 SEP 27 AM 11:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

Post Office Box 14344
Bradenton, FL. ~~34209~~
34280

Post Office Box 14344
Bradenton, FL. 34209

REINSTATEMENT

96-99RD

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

11-17-76

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

59-1849813

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)

600003007186--8

1 Titles	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	Fred Andrews	6301 Gulf DR. Holmes Beach, FL. 34217	Holmes Beach, FL. 34217
Vice Pres	Harry Childs	8615 Bayshore Rd. #9	Palmetto, FL. 34221
Secy	Fran Hubbard	1212 56th St. W.	Bradenton, FL. 34209
Treas	Elsie McDonough	5813 11th Ave. W.	Bradenton, FL. 34209
DIR.	MARTY BAYMOR	6807 - 7th AVE. W.	Bradenton, FL. 34209
DIR.	DON McKie	10125 MANATEE AVE. W.	Bradenton, FL. 34209
DIR.	ALBERTA Wegner	5619 Bayshore Rd. #403	Palmetto, FL. 34221

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name Fred Andrews

Street Address (P.O. Box Number is Not Acceptable)

6301 Gulf DR.

Suite, Apt. #, Etc.

City

Holmes Beach

State

FL

Zip Code

34217

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

Fred Andrews

REGISTERED AGENT MUST SIGN

Date

9/8/99

11. This corporation owes 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:

Elsie T. McDonough

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/22/99

Date

941-794-9015

Daytime Phone #

CRRE001 (12/96)