

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 AUG 13 AM 8:00

DOCUMENT # 753978

1. Corporation Name

Callahan Athletic Association, Inc.

2. Principal Office Address

PO Box 1169

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Callahan, FL

City & State

Zip

32011

Country

Nassau

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

41-2104970

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

700022290307
08/13/03--01064--015 **420.00

MRS

7. Name and Address of Current Registered Agent

Name

Sheri K. Thomas

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

55162 Jewel Thomas Road

Suite, Apt. #, Etc.

City

Callahan

State

FL

Zip Code

32011

REINSTATEMENT

00-03

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Sheri K. Thomas

REGISTERED AGENT MUST SIGN

Date

8/8/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Jeffery A. Lee	274033 Murree Rd. Callahan, FL 32011	Callahan, FL 32011
VP	James MacDonald	949 Limousine Ln.	Bryceville, FL 32009
S	Laurie Brinson	55021 White Oaks Pl	Callahan, FL 32011
T	Sheri K. Thomas	55162 Jewel Thomas Rd.	Callahan, FL 32011
Cheer Coord CC	Ceryle Freeburn	55157 Eden Place	Callahan, FL 32011
Commissioner C	Duane Cooper	35123 Gator Noleway	Callahan, FL 32011

10. 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:

Sheri K. Thomas

Sheri K. Thomas

Date

Daytime Phone #

7269

CR2E081 (10/02)