

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 762471

1. Corporation Name

OSCEOLA YOUTH SOFTBALL LEAGUE, INC

2. Principal Office Address

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

3511-BAKER DR.

P.O. BOX 422-13-1

City & State

City & State

KISSIMMEE, FL

KISSIMMEE, FL

Zip

Country

Zip

Country

34744

OSCEOLA

34742-2131

OSCEOLA

2000-2001 UBR

4. Date Incorporated or Qualified
To Do Business in Florida

3/17/82

5. FEI Number

592227036

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

John B. Ritch

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

100 Church St., Kissimmee, Florida

Suite, Apt. #, Etc.

City

Kissimmee

State

FL

Zip Code

34741

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

John B. Ritch

REGISTERED AGENT MUST SIGN

Date 6/12/01

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
T/D	DAVID KRAUS	511 LONGMEADOW ST	CELEBRATION, FL 34747
P/D	JOHN KERR	5139 HIBISCUS RD.	KISSIMMEE, FL 34746
M/D	MARK HEDRICK	7716 SOUTH INDIAN RIDGE TR	KISSIMMEE FL 34747

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)(b), 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:

David Kraus

DAVID KRAUS

6/2/01

407 903 0005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #



June 18, 2001

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Subject: Osceola Youth Softball League, Inc., Kissimmee, Florida
Document #762471, FEI #592227036
Submittal of Corporate Reinstatement Application, and Request
for Certification of Status

To Whom It May Concern:

On behalf of Osceola Youth Softball League (OYSL), I have enclosed a properly completed Corporation Reinstatement application along with a check in the amount of \$131.25. The application was completed in accordance with the Application Instructions as listed on your division's web page. Based on a telephone conversation I had with one of your representatives on May 25, the check amount covers the annual report fee of \$61.25 for years 2000 and 2001, and \$8.75 for a certificate of status. Your agency's records indicate that the year 2000 form was returned to your office as "undeliverable" by the U.S. Post Office, and because of this, the \$175 reinstatement fee is waived.

Also, please note that OYSL's mailing address has changed, the current mailing address is included in Block 3 of the application, and is also shown below. Please direct all future correspondence to this address, and please update your records to reflect the current mailing address.

Thank you for your assistance in this matter.

Sincerely,

OSCEOLA YOUTH SOFTBALL LEAGUE, INC.

By: David Kraus, OYSL Treasurer

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