


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		06 FEB 27 AM 10:45 SEC. OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # 767949					
1. Corporation Name The 20/20 Mens Social & Civil Club Inc.					
2. Principal Office Address 3221 Martin Luther King Dr Suite, Apt. #, etc. City & State Pensacola, FL 32503 Zip 32503 Country Escambia		3. Mailing Office Address 2909 Rhythm St Suite, Apt. #, etc. City & State Pensacola, FL 32505 Zip 32505 Country Escambia		CR2E081 (12/05) 4. Date Incorporated or Qualified To Do Business in Florida 1997 5. FEI Number 59-3451577 Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name Walter J Davis					
Street Address (P.O. Box Number is Not Acceptable) 2909 Rhythm St					
Suite, Apt. #, Etc.					
City Pensacola				State FL	Zip Code 32505
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 <i>Walter J. Davis</i>				Date <i>1-26-06</i>	
REGISTERED AGENT MUST SIGN					
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		
Pres	Willie McConnico	3417 West Lee St	Pensacola, FL 32505		
V Pres	John Beasley	1217 W Gadsden St	Pensacola, FL 32501		
Sec	Walter J Davis	2909 Rhythm St	Pensacola, FL 32505		
Treas	Walter J Davis	2909 Rhythm St	Pensacola, FL 32505		
Bar MGR	Walter J Davis	2909 Rhythm St	Pensacola, FL 32505		
" "	Thomas Rideau Jr	6830 Cariba Ct	Pensacola, FL 32526		
" "	James Stallworth Jr	1655 W Young St	Pensacola, FL 32501		
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 contained in Chapter 119, 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: <i>Walter J. Davis</i>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
				Date	Daytime Phone #