

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

97 DEC 29 AM 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F96000000882

1. Corporation Name

AMERICAN TAEKWONDO ASSOCIATION, INC.

Principal Place of Business

6210 BASELINE ROAD
LITTLE ROCK AR 72209

Mailing Address

6210 BASELINE ROAD
LITTLE ROCK AR 72209

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

02/22/1996

5. FEI Number

71-0507985

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
PCD	LEE, HAENG U	2209 KAREN LANE	ALEXANDER AR
V	WOLFF JR, JAMES E	500 FOXWOOD DRIVE	JACKSONVILLE AR

600002387296-7
-12/31/97-01055-005
****165.00 ****165.00
12-30-97

8. Name and Address of Current Registered Agent

LEE, SOON H
1013 W 15TH STREET
PANAMA CITY FL 32401

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

[Signature] C.O.O.
REGISTERED AGENT MUST SIGN

Date 12/15/97

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/15/97 800-872-2821
Date Daytime Phone #

CP02040 (8/97)



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American Taekwondo Association

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December 14, 1997

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

Dear Sirs,

Enclosed please find a reinstatement application for our company. We have no record of receiving any prior notices of this filing. Our company notified your office the week of Dec. 8th to find out what stasis we were and why we would have received this reinstatement notice. The instructions we received was to notify you in writing of our situation. Please abate any penalties regarding this application as there were no notices received by us other than this one.

We appreciate your assistance and if there are any questions please contact our office.

Thank You.

Sincerely,

Oneida Brockway

Oneida Brockway
Controller