

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR



FLORIDA DEPARTMENT OF STATE

K. Wayne Harris  
Secretary of State

DIVISION OF CORPORATIONS

10/2  
FILED

00 OCT 19 PM 3:57

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # F98000006497

1. Corporation Name

AMERICAN SPIRIT RACING LTD., INC.

Principal Place of Business

Mailing Address

4403 SW 15TH AVE  
CAPE CORAL FL 33914

4403 SW 15TH AVE  
CAPE CORAL FL 33914



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

11/30/1998

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0399317

Applied For

Not Applicable

City & State

City & State

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
CPS	LEWIS, JONATHAN N	4403 SW 15TH AVE	CAPE CORAL FL 33914
WT	LEWIS, JULIE	4403 SW 15TH AVE	CAPE CORAL FL 33914

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LEWIS, JONATHAN N  
4403 SW 15TH AVE  
CAPE CORAL FL 33914

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]*  
REGISTERED AGENT MUST SIGN

Date 10-17-00

11. 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]* Jonathan N. Lewis  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-17-00 941-540-4277

KE

CR2E040 (8/00)

## AMERICAN SPIRIT RACING, INC.

October 17, 2000

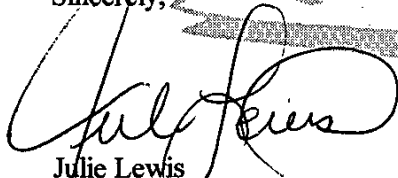
Ms. Katherine Harris  
Secretary of State  
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Dear Ms. Harris,

Per our conversation on Thursday October 12th and Tuesday October 17th, I am enclosing a check for \$150 to cover the fees for the Corporation's Annual Report. I have not received any form (except for the one enclosed) pertaining to the corporation. As to that effect, the Annual Report was not filed timely.

I am asking you to reinstate American Spirit Racing Ltd., Inc. to desired status. If you have any questions please contact me at 941-540-4277. Thank you in advance.

Sincerely,



Julie Lewis  
Executive Vice President  
Corporate Secretary