PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 NOV 12 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # J66223

1. Corporation Name
All Pro Sports Camps, Inc.

| 2. Principal Office Address | 3. Mailing Office Address |
|---|---|
| 3640 SE Gatehous Cir | 3640 SE Gatehous Cir |
| Suite, Apt. #, etc. Bldg. 17 - #270 | Suite, Apt. #, etc. Bldg. 17 - #270 |
| City & State Stuart, Florida | City & State Stuart, Florida |
| Zip 34994 Country | Zip 34994 Country |

4. Date Incorporated or Qualified To Do Business in Florida 04/02/1987

5. FEI Number 59-2815947 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $30.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street
Suite, Apt. #, Etc.:
City: Tallahassee State: FL Zip Code: 32301

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: Dolores Burton REGISTERED AGENT MUST SIGN Date: 11-12-2003

CR2E031 (1/97)

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 | Nicholas Stracick | 3640 SE Gatehous Cir, Bldg.17 | Stuart, Florida 34994 |
| COB | Edward D. Russell | 2 Virgina Place | Buffalo, New York 14202 |
| D | Bert La Bell | 6466 Rapids Road | Lockport, New York 14094 |
| D | Paul Becker | 6468 La Don Drive | Hamburg, New York 14075 |
| | | | |
| | | | |

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: Nicholas Stracick 11/10/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

# Florida Department of State

Division of Corporations
Public Access System

PEW

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To:
Division of Corporations
Fax Number : (850)205-0384

From:
Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
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File 1ST

## CORPORATION REINSTATEMENT

### ALL PRO SPORTS CAMPS, INC.

| | |
|---|---|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | $661.25 |

750.00

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