PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Jim Smith

> Secretary of State DIVISION OF CORPORATIONS

N0000007099 DOCUMENT #

1. Corporation Name

CENTRAL FLORIDA BASS ANGLERS, INC.

Principal Place of Business

Mailing Address

7016 ARCHWOOD DRIVE ORLANDO FL 32819

SIGNATURE:

7016 ARCHWOOD DRIVE ORLANDO FL 32819

FILED

02 DEC -4 AM 8:31

SECRETARY OF STATE TALLARMENTAL FLORIDA



OCCEPS45000000

If above addresses are incorrect in any way, line through incorrect information and enter correction below.					12/04/0201029011 **70.00		
New Principal Office Address, If Applicable New Principal Office Address, If Applicable					Date Incorp.	orated or Qualified	
Suite, Apt. #, etc.					To Do Business in Florida 10/23/2000		
2610	DONALDSON DR	DONALD	son DR	5. FEI Number	APPLIED FOR	Applied For	
City & State	ANDO, FLORIDA	WDO. F	LORIDA	6.	APPLIED FOR	Not Applicable	
32812 Country 32812 Country					I	OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status
7. Names a	and Street Addresses of Each Officer and/o		rida nonprofit corpora	itions must list at lea	st 3 directors)		<u></u>
Title(s)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip		
PD	STRICKLAND, TONY		769 BARGER DRIVE			DELTONA FL 32738	
VD	WARNER, MICHAEL B		7636 KINGS PASSAGE AVENUE			ORLANDO FL 32835	
- 3TD -	-WARD, TEX-		P-0-BOX 1346			GENEVA FL 32732	
D	HEIDGERKEN, JERALD	1319 EDMUNDSHIRE LANE			ORLANDO FL 32806		
STD	VENTRELLO,J	2610 DONALDSON DRIVE			ORLANDO, FL 32812		
8. Name and Address of Current Registered Agent				Name and Address of New Registered Agent			
				Name** Josef	어 다	VENTRE	(10
CRAIG, RICHARD 7016 ARCHWOOD DRIVE				Street Address (P.O. Box Number is Not Acceptable)			
<u></u>				Suite, Apt. #, Etc.			
				Cit.			0-1-17-0-1
				ÖRLAN	000		State Zip Code FL 33812
10. I, being	appointed the registered agent of the abov	e named corpo	ration, am familiar wi	th and accept the ob	oligations of Section	on 607.0505, F.S. or 617	
Signature of Registered /		SISTERED AGI	ENT MUST SIGN	IRED		Date	5/02
this reins owed by	that I am a officer or director or the receiving tatement application, the reason for dissolution the corporation have been paid and the number of the corporation have been paid and my signification is true and accurate, and my signification is true and accurate.	ution has been ames of individe	eliminated, the corpo uals listed on this forr	rate name satisfies t n do not qualify for a	the requirements an exemption und	of section 607.0401 or 6	17.0401, F.S., that all fees

To: Florida Department of State
Division of Corporations
P O Box 6327
Tallahassee Florida 32314

Central Florida Bass Anglers, Inc (CFBA) did not receive a Uniform Business Report (UBR) notice. I received this application for reinstatement on 11/09/02. I have been elected as the new Secretary, Treasure, and Director. CFBA is a non-profit organization. I am enclosing a check for the filling fee of \$61.25 and \$8.75 for Certificate of Status to put with our records. I hope with the new address that there will be no further problems with filling on-time.

Secretary, Treasure, and Director Joseph H. Ventrello

FILLING FEE \$61.25 \$-8.75

PLEASE LET ME KNOW IF
THERE ARE ANY OTHER FORMS
THAT ARE NEEDED.

Joseph Walth