

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

09 FEB 17 PM 12:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # NO 1000008947

1. Corporation Name

25 Sports Foundation, Inc.

2. Principal Office Address - No P.O. Box #

5167 Wellington Park Cir

Suite, Apt. #, etc.

D-23

City & State

Orlando, FL

Zip

32839

Country

USA

3. Mailing Office Address

3131 Piedmont Rd. NE

Suite, Apt. #, etc.

Suite 205

City & State

Atlanta, GA

Zip

30305

Country

USA

REINSTATEMENT 07-09
CR2E081 (12/08)

4. Date Incorporated or Qualified
To Do Business in Florida

12-21-2001

5. FEI Number

59-3760523

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$0.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Harry Williamson

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

5167 Wellington Park Cir.

Suite, Apt. #, Etc.

D-23

City

Orlando

State

FL

Zip Code

32839

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

Harry Williamson

REGISTERED AGENT MUST SIGN

Date 2/12/09

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
PC	Fernando Bryant	5167 Wellington Park Cir. D-23	Orlando, FL 32839
FD	Keshia Walker	3131 Piedmont Rd. Ste 205	Atlanta, GA 30305
PM	Brandi Scott	3131 Piedmont Rd. Ste 205	Atlanta, GA 30305
D	Harry Williamson	5167 Wellington Park Cir. D-23	Orlando, FL 32839

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

Fernando Bryant

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/12/09

Daytime Phone #

02/17/09-01005-017 ***192.50