

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 MAY -6 AM 8:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000007682

1. Corporation Name

Key West Junior Football League, Inc.

~~115000007682~~ 20261

2. Principal Office Address

3155 Flagler Ave.

Suite, Apt. #, etc.

City & State

Key West, FL

Zip

33040

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

4. Date Incorporated or Qualified
To Do Business in Florida

10/07/02

5. FEI Number

20-1056095

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Stephen L. Bell

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

19669 Caloosa St.

Suite, Apt. #, Etc.

City

Sugarloaf Key

State

FL

Zip Code

33042

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

Date 4.13.5

REGISTERED AGENT MUST SIGN

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/D | Stephen L. Bell | 19669 Caloosa St. | Sugarloaf Key, FL 33042 |
| VP/D | Ralph Major | 115 A Petronia St. | Key West, FL 33040 |
| T/D | Mindy Higgs | 3735 Paula Ave. | Key West, FL 33040 |
| S/D | April Bell | 19669 Caloosa St. | Sugarloaf Key, FL 33042 |
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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)(f), 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

4.13.5 (305) 923 7130

Date

Daytime Phone #

CR2008 (01/05)