

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 JUL -7 AM 9:13

DOCUMENT # N14768

1. Corporation Name

Timucua Pop Warner Football Conference, Inc.

*B 7/8/08*  
**REINSTATEMENT 06-08**

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

303 SE 17th Street

Suite, Apt. #, etc.

309-212

City & State

Ocala, FL

Zip

34471

Country

United States

3. Mailing Office Address

303 SE 17th Street

Suite, Apt. #, etc.

309-212

City & State

Ocala, FL

Zip

34471

Country

United States

CR2E081 (12/07)

4. Date Incorporated or Qualified  
To Do Business in Florida

05/06/86

5. FEI Number  
59-2696952

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

Richard L. Tatman

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

10520 SE 42nd Terrace

Suite, Apt. #, Etc.

City

Belleview

State

FL

Zip Code

34420

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

*Richard L. Tatman*

REGISTERED AGENT MUST SIGN

Date 07/03/08

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	Rick Tuten	4801 SE 44th Avenue Road	Ocala, FL 34480
S	Dennis Treadway	6139 W. Pine Circle	Crystal River, 34429
T	Rick Tatman	10520 SE 42nd Terrace	Belleview, FL 34420
C	Steve Munz	12834 CR 101	Oxford, FL 34484

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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 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:

*Richard L. Tatman*

Richard L. Tatman

07/03/08

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #