

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 DEC 27 AM 10:45

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # N21360

1. Corporation Name

PINELLAS PARK PONY BASEBALL, INC.

Principal Place of Business

Mailing Address

P.O. BOX 246
PINELLAS PARK FL 33665

P.O. BOX 246
PINELLAS PARK FL 33665



REINSTATEMENT 9600

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

06/29/1987

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2837775

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
P	PARAPON, PERRY Daniel, Lawrence	6214 82ND WAY NORTH 5941 - 72ND AVE NO.	LARGO FL 34647 Pinellas Park FL 33781
VP	LARRY BAXTER	5461 65TH TERR.	PINELLAS PARK FL 34665 33781
TD	BAXTER, BETTY	5461 65TH TERR. NO	LARGO FL 34677 Pinellas Park FL 33781
PAT	THOMAS, PAT	5965 78 AVE. NO.	PINELLAS PARK FL 34665
S	PARAPON, CHERYL	6214 82 W. NO	LARGO FL 34647
			0000002045790--9 -01/03/97--01168--001 ***236.25 ***236.25

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BETTY BAXTER
5461 65TH TERR. N.
PINELLAS PARK FL 34665

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Betty J. Baxter
REGISTERED AGENT MUST SIGN

Date 12-22-96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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:

Betty J. Baxter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
BETTY J. BAXTER

12-22-96

Date

546 6161

Daytime Phone #