

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 NOV 19 PM 2:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N25980

1. Corporation Name

ARABIAN RACING ASSOCIATION OF FLORIDA, INC.

Principal Place of Business

% JOSEPH DOYLE
3025 GLEN OAK AVE
CLEARWATER FL 33759

Mailing Address

% JOSEPH DOYLE
3025 GLEN OAK AVE
CLEARWATER FL 33759

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

2. New Principal Office Address, if Applicable

6851 BELMONT CRT
Suite, Apt. #, etc.

3. New Mailing Office Address, if Applicable

6851 BELMONT CRT
Suite, Apt. #, etc.

City & State

MORRISTON FL
Zip 32668 Country LEVY

City & State

MORRISTON FL
Zip 32668 Country LEVY

REINSTATEMENT 1999

4. Date Incorporated or Qualified
To Do Business in Florida

04/19/1988

5. FEI Number

50-2958275

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	REEDMAN, RICHARD FRED COX	5474 SHADY OAK 6851 BELMONT CRT	LAKELAND FL 33601
SD	WALDRON, CATHY	18355 PHILLIPS RD	BROOKVILLE FL 34609
TD	SWEETING, GUYTON	5816 ROSE LANE	TAMPA FL 33619
VD	GOEDMAN, MICHAEL CATHY VENABLE	21344 LAGE HORSE LANE 3364 RACKLEY RD	BROOKVILLE FL 34602
ED	DOYLE, JOSEPH	3025 GLEN OAK AVE	CLEARWATER FL 33759
			300003071763-8
			-12/15/99--01096--019
			***236.25 ***236.25

8. Name and Address of Current Registered Agent

DOYLE, JOSEPH
3025 GLEN OAK AVE
CLEARWATER FL 33759

9. Name and Address of New Registered Agent

Name FRED COX
Street Address (P.O. Box Number is Not Acceptable) 6851 BELMONT COURT
Suite/Apt. #, Etc. 1100
City MORRISTON
State FL Zip Code 32668

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

FRED COX

REGISTERED AGENT MUST SIGN

Date

10/28/99

11. 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:

Cathy Waldron

11-16-99

Date

Daytime Phone #