

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



APPLICATION FOR REINSTATEMENT

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

FILED
 00 FEB -7 AM 8:35
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # N34550

1. Corporation Name

Gulf Coast Senior Games, Inc. W-1883

Principal Place of Business

Mailing Address

P.O. Box 1061
 Bradenton, FL 34206

REINSTATEMENT 98-2000

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

SP

Suite, Apt. #, etc.

Suite, Apt. #, etc.

3/23/94

City & State

City & State

5. FEI Number

Applied For

65-0155278

Not Applicable

Bradenton, FL

Zip Country

Zip Country

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1	2	3	4
Pres.	David McArthur D	3707 26th St. W.	Bradenton, FL 34205
Treas	Gordon DePew D	4407 Muirfield Dr.	Bradenton, FL 34210
Sec.	Jeannie Kawcak D	1700 21st Avenue West	Bradenton, FL 34205

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 ****367.50 ****367.50

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name		David McArthur	
Street Address (P.O. Box Number is Not Acceptable)		3707 26th St W	
Suite, Apt. #, Etc.			
City	State	Zip Code	
Bradenton	FL	34205	

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

R. David McArthur

REGISTERED AGENT MUST SIGN.

Date 1-27-2000

11. This corporation owes the current year Intangible Personal Property Tax due June 30. 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: *R. David McArthur* R. DAVID McARTHUR 1-27-2000 (94) 753-4449
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CFR2E081 (12/98)