PLEASE READ ALL INSTRUCTION S BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE APPLICATION Sandra B. Mortham **FOR** Secretary of State REINSTATEMENT **DIVISION OF CORPORATIONS** FILED 97 FEB -4 AM 9: 12 **DOCUMENT #** 1136766 1. Corporation Name SECRETARY OF STATE Woodham High School Quarterback Club TALLAHASSEE, FLORIDA Woodhan High School Quateback Club REINSTATEMENT Principal Place of Business P65a (Ola , FL If above addresses are incorrect in any way, line through incorrect information and enter correction below Do NOT WRITE IN THIS SPACE
Date Incorporated or Qualified
To Do Business in Florida 2. New Principal Office Address, If Applicable 3. New Mailing Address, If Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State Not Applicable S8.75. Adoptona fee ir auni Zip Country Zin. Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director
(Do NOT Use Post Office Box Numbers) City / State / Zip 5924 West Shore Dr. Pasacola, FL 32506 President 42 East Morshall W Pasacola PL 32505 42 East marshall M Persarola FL 32505 380 East Eisley St. Dtreasurer Bernice Cuningham Persacola, FL 32514 002061045---E -02/07/97--01015--007 *****297.50 *****297.50 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) 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. Catly Hundle REGISTERED AGENT MUST SIGN Signature of Registered Agent Date <u>December</u> 30, 1996 11. Does this corporation pay any intangible tax to the (See other side for information on intangible tax.) Dept. of Revenue under S. 199.032, Florida Statutes. Yes L 12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 807 or 817, F.S. I further certify that when filling this reinstatement application the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 807.0401, F.S., and that all fees owed by the corporation have been paid. 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: