

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # **NA3000000287**

1. Corporation Name

Bayou George Athletic Association

Principal Place of Business

Mailing Address

**6010 Jaycee Dr
(Ballpark)
Youngstown, FL 32466**

**PO Box 1005
Youngstown, FL
32466**

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

1-93

5. FEI Number

59-2440058

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	Lynn Certalich	6546 Keiber Circle	Youngstown, FL 32466
SD	Cindy Jones	8719 Charles J. Rd.	Youngstown, FL 32466
TD	Belinda Ausherman	6949 Keiber Circle	Youngstown, FL 32466

**800002427158--9
-02/11/98--01004--003
***387.50 ***367.50**

8. Name and Address of Current Registered Agent

**Lynn Certalich
6546 Keiber Circle
Youngstown, FL 32466**

9. Name and Address of New Registered Agent

Name **Lynn Certalich**
Street Address (P.O. Box Number is Not Acceptable) **6546 Keiber Circle**
Suite, Apt. #, Etc.

City **Youngstown**

State **FL** Zip Code **32466**

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

Lynn Certalich
REGISTERED AGENT MUST SIGN

Date

AD

11. This corporation owes or has paid 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

Belinda Ausherman **Belinda Ausherman** **1-31-98 (850) 722-0080**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (1-98)