

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # N93000001024  
1. Corporation Name

American Heritage Booster Club, Inc.

Principal Place of Business Mailing Address  
12200 W. Brwd. Blvd. 4310 Sheridan Street #202  
Plantation, FL 33325 Hollywood, FL 33021

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03/01/93	
City & State		City & State		5. FEI Number	
Zip		Zip		65-0406372	
Country		Country		Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

REINSTATEMENT

9/19/99

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
D	William Laurie	12200 W. Broward Blvd.	Plantation, FL 33325
D	Byron Walker	12200 W. Broward Blvd.	Plantation, FL 33325
D	Douglas Laurie	12200 W. Broward Blvd.	Plantation, FL 33325

580003026555-2  
-10/27/99-01073-003  
\*\*\*\*542.50 \*\*\*\*542.50

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
James Mueller 7381 S. W. 6 Court Plantation, FL 33317	Name William Laurie Street Address (P.O. Box Number is Not Acceptable) 12200 W. Broward Blvd. Suite, Apt. #, Etc. City Plantation State FL Zip Code 33325

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 *William Laurie* Date 10/15/99  
REGISTERED AGENT MUST SIGN

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: *William Laurie* Date 10/15/99  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR