

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 # N94000002276

1. Corporation Name

NAPLES GATORS POP WARNER FOOTBALL, INC.

Principal Place of Business

171 STEVEL LANE
NAPLES FL 33961
US

Mailing Address

171 STEVEN LANE
NAPLES FL 33961
US

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

05/03/1994

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0477835

Applied For

City & State

City & State

Not Applicable

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)

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
DST	LEE, DEBBIE	171 STEVEN LANE	NAPLES FL 000002338190--8
DT	DELOHER, SHARON	4918 KENT DR.	NAPLES FL 11/04/97-01090-005 *****236.25 ****236.25
D	WILKOMM, WILLIAM EDNA STEHL	171 STEVEN LANE 1680 17th ST SW	NAPLES FL NAPLES, FL
D	SAMCHROENER, DOTIE FERN CANTISANI	5800 24TH AVE SW 329 BURNINGTREE DR	GOLDEN GATE FL NAPLES, FL
DVP	BYINGTON, RON	1840 BARBISON LANE 6151 12th AVE S.	NAPLES FL
D	LAWRENCE, TIM DIANE JOHNSON	1179 6TH LANE, NORTH	NAPLES FL

8. Name and Address of Current Registered Agent

PFEUFFER, WILLIAM A
501 GOODLETTE ROAD NORTH
NAPLES FL 33940

9. Name and Address of New Registered Agent

Name DEBORAH LEE
Street Address (P.O. Box Number Is Not Acceptable)
171 STEVEN LANE
Suite, Apt. #, Etc. 000002338190--8
City NAPLES State FL Zip Code 33961
Date 10/28/97

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

Deborah Lee

REGISTERED AGENT MUST SIGN

Date 10/28/97

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Deborah Lee
DEBORAH LEE

10/28/97

1-941
732.12.77
Daytime Phone #

CP20040 (8/97)