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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM ED			
APPLICATION FLORIDA DEPARTMENT Sandra B. Mort			ALE)
REINSTATEMENT Secretary of State			
DOCUMENT # N94000003734			98 JUL 16 PM 2: 23
1. Corporation Name COCOA YOUTH FOOTBALL ASSOCIATION, IT			SECRETARY OF STATE TALLAHASSEE, FLORIDA
INC INCIDATE			IALL APPAOALLY TECHNOLOGY
Principal Place of Business Mailing Address			
1881 Rosetine St. P.O. Box 1463			
STRADLEY PARK CUCOA, FL 32923			Λι. Λ.
If above addresses are incorrect in any way, line hrough incorrect information and enter correction below.  2. New Principal Office Address, If Applicable  3. New Mailing Office Address, If Applicable			Incorporated of Qualific VI ENT
Suite, Apt. #, etc.	Suite, Apt. #, etc.		o Business in Florida
City & State	City & State	5. FEI N	Jumber 59-3258954 Applied For Not Applicable
Zip Country	Zıp Cour	ntry 6.	FICATE 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	1	Street Address of Each Officer and/or Director Use Post Office Box Numbers)	City / State / Zip
PID WILLIAM W. HURS	T 622 LAI	KE TAHOE DRIVE FL 32926	COCOA, FI 32926
V/D HERB MOODY	1096 Co	ronado Drive	ROCKLEDGE, FL 32955
D. KEVIN D. CAUFM	AN 4625	DOWLING PE	VE CUCOA, FI 32928
D JAMES COWAN 110		PARK DRIVE	COCOA, FL 32922
5/D Debra E. Hurst 622 La		le Tahoe DR	Cocoa, FL. 32926
			367-17-08
8. Name and Address of Current Registered Agent		9. Name	e and Address of New Registered Agent
WILLIAM W. HURST  622 LAKE TAHOE DRIVE  COCOA, FLORIDA 32926		Street Address (P.O. Box N	
COCOA FLORIDA	; PRIVE	Suite, Apt. #, Etc.	<i>174H0E DUVE</i> 400002599240
3 COCOM, PLORIUM 32926		City COCOA	-07/27/980132013 ****367. Fill (\$25000000000000000000000000000000000000
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 W. Hurst pres. Date 7/1/98 REGISTERED AGENT MUST SIGN			
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No 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: (1) LIGHT W. DIES. 7/1/98 407-633-5594  Date Daytime Phone #			