

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 OCT 30 AM 8:50

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # N95000000437

1. Corporation Name

WEST COAST YOUTH FOOTBALL CONFERENCE, INC.

Principal Place of Business

11500 SUMMIT WEST BLVD.
TEMPLE TERRACE FL 33617
US

Mailing Address

11500 SUMMIT WEST BLVD.
TEMPLE TERRACE FL 33617
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

01/27/1995

Suite, Apt. #, etc.

#7-C

Suite, Apt. #, etc.

#7-C

5. FEI Number

59-3354624

Applied For

Not Applicable

City & State

City & State

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	WING, KENNETH G ESQ	11500 SUMMIT WEST BLVD., #7C	TEMPLE TERRACE FL 33617
TD	DAVIS, KENNY	1210 TULIPWOOD DRIVE	SEFFNER FL 33584
D	SIBSON, TIM	4502 CABBAGE PALM DRIVE	VALRICO FL 33511
D	CHAMBERS, STEVE	4890 W. KENNEDY BLVD., #440	TAMPA FL 33609
100008694521 10/30/02--01032--026 **236.25			

8. Name and Address of Current Registered Agent

WING, KENNETH G ESQ

11500 SUMMIT WEST BLVD., #7C
TEMPLE TERRACE FL 33617

9. Name and Address of New Registered Agent

Name

Kenneth G. WING, ESQ.

Street Address (P.O. Box Number is Not Acceptable)

11500 Summit West Blvd

Suite, Apt. #, Etc.

#7-C

City

Temple Terrace

State

FL

Zip Code

33617

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. or 617.0505, F.S.

Signature of
Registered Agent

Kenneth G. Wing
REGISTERED AGENT MUST SIGN

Date

10/21/02

11. 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)(f), 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:

Kenneth G. Wing
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/21/02

Daytime Phone #

813-545-6401

CR20040 (8/02)