

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

FILED

98 NOV 19 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000001956

1. Corporation Name

CORAL SPRINGS RENEGADES SOCCER CLUB, INC.

Principal Place of Business

Mailing Address

~~9600 WEST SAMPLE ROAD
SUITE 500
CORAL SPRINGS FL 33065~~

~~9600 WEST SAMPLE ROAD
SUITE 500
CORAL SPRINGS FL 33065~~

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
10350 NW 42ND DR

3. New Mailing Office Address, If Applicable
10350 NW 42ND DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
CORAL SPRINGS, FL

City & State
CORAL SPRINGS, FL

Zip 33065 Country

Zip 33065 Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/25/1995

5. FEI Number

65-0624541

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
DP DVP	PURCELL, WILLIAM	10350 NW 42ND DR.	CORAL SPRINGS FL
DVP DP	WAX, BARRY	9099 NW 52ND COURT	CORAL SPRINGS FL
DT	SOVET, GUY	6012 N.W. 78TH TERRACE	TAMARAC FL
DS	FREEMAN, ALANA	11440 NW 18TH MANOR	CORAL SPRINGS FL
			600002699626--8 -12/01/98--01089--017 ****236.25 ****236.25

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PURCELL, BILL
10350 NW 42ND DR
CORAL SPRINGS FL 33065

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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

Bill Purcell

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date 11-18-98

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)(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:

Barry Wax
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/18/98

Date

954-360-7033

Daytime Phone #

CR2E040 (9/98)