3			READ A		RUCTIONS		OMPLETI	AMPHONI GIVA	FORM.		
APPLICATION FLORIDA DEPARTM FOR Katherine					Katherine Ha	ırris		FILED			
REINSTATEMENT Secretary of S DIVISION OF CORPO						99 AUG 24 PH I2: 00					
DOCUMENT # N9600001463							SECRETARY OF STATE TAULAHASSEE, FLORIDA				
•		Sport	Promoti	ons, In	corporated		IALL	.АЛАООВЕ, Г	LOMDA		
Magazoneus											
Principal Place of Business Mailing Address 326 E. Merritt Island Causeway, Suite #300											
Mer	ritt Isl	and, F	2 32952	•			REIN	STATE	MEN	T99-99	
	If above addresses are incorrect in any way, line through incorrect information and enter of New Principal Office Address, If Applicable 3. New Mailing Office Address, If A						4. Date incorpo	orated or Qualified	1		
Suite, Apt. #, etc.				Suite, Apt. #,	etc.		5. FEI Number 03/13/1996 Applied For				
City & State			City & State			59-340	1.4pmes / c.				
Zıp		Country		Zip	Countr	у	6. CERTIFICATE	OF STATUS DESIF		Academinal Four regained l i Ceithreate of Status	
7. Names	and Street Add			r Director (Flo	rida nonprofit corpora	ations must list at lea		1			
Title(s)	2					ficer and/or Director se Post Office Box N	•	4	City / State	/ Zip	
P/ D	Jennings R. Buchanan				1205 Sama	r Road	Cocoa Beach, FL 32931				
V/ D	Carlissa Buchanan			6120 Bent Way Drive				Charlotte, NC 28226			
T/ D	Steven A. Deel			2117 Bent Tree Cou			t	Round Rock, TX 78681			
							61	00002	9746	5769	
									179901 858.75	051008 ****358.75	
8. Name and Address of Current Registered Agent Name							Name and Address of New Registered Agent				
Jennings R. Buchanan 1205 Samar Road						Street Address (F	P.O. Box Number	is Not Acceptable)	(8) (4) (8)	
Cocoa Beach, FL 32931						Suite, Apt. #, Etc.					
						City State Zip Code					
10. I, being	g appointed the	registered a	gent of the abov	e named corp	pration, em familiar w	ith and accept the o	bligations of Secti	on 607.0505, F.S.			
Signature o Registered	of d Agent	//:	INV	SISTERED AG	BENT MUST SIGN			Date06	-20-99	aA	
			wes the		rear ue June 30.	Yes] (5	see other side l on intangi		
this rein	nstatement app by the corporation	lication, the too	reason for dissol n paid and the n	ution has beer ames of individ	mpowered to execute a eliminated, the corpo duals listed on this for tive the same legal eff	orate name satisfies m do not qualify for	the requirements an exemption un	of section 607.04	01 or 617.040	ortify that when filing I, F.S., that all fees e Information indicated	
SIGNA	TURE:	Man (TYPED OR PRII	ITED NAME OF	Steven	A. Dee1	06-2	0-99 (9-3100 x404	