## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

					1	FILEC	)	
DOCUMENT # N9600003427  1. Entity Name TATE HIGH SCHOOL CHEER ASSOCIATION, INC.					2	ODT DEC 17	AM 10: 06	, . ^.
Principal Place of Business Mailing Address 1771 TATE ROAD P.O. BOX 665 CANTONMENT, FL 32533 US GONZALEZ, FL 3256			) US		] ]	TALLAHASSE	E, FLORIU	IA
				!				
Principal Place of Business - No P.O. Box #     3. Mailing Address					1 199,,12, 212 1911-			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1211 <b>2007</b>	MSTA	2E099 (1/07)	EN
City & State		City & State			4. FEI Number 59-339864	10	<u> </u>	applied For lot Applicable
Zip Country	Z	Zip Cou		ntry	5. Certificate of Status Desired S8.75 Additional Fee Required			
6. Name and Addre	ss of Current Register	red Agent			7. Name and Add	iress of New Register	ed Agent	
NORTON, JOY				Name				
1372 WOODFIELD DR. CANTONMENT, FL. 32533			ļ	Street Address (P.O. Box Number is Not Acceptable)				
0.000 ONNECOT, FE 32333					<del></del>			
			-	City			Zip Co	de
<ol> <li>The above named entity submits thin the obligations of registered agent.</li> </ol>	is statement for the purp	pose of changing its	registered	d office or register	ed agent, or both, in	the State of Florida. I	am familiar with	, and accept
SIGNATURE								
Signature, typed or printed name	of registered agent and title if an	opicable (NOT)	E: Registered	Agent signature require	nd when fainstating)	DA	E	
FILE NOW!!! FEE IS \$61.25  After January 1, 2008, Fee will be \$122.50  In accordance with corporation did not in accordance with corporation of the corporation of th			s. 607.193(2)(b), eceive the prior	F.S., the notice.		eck payable to partment of S		
	CERS AND DIRECTORS	\$	11.	A	DDITIONS/CHANG	ES TO OFFICERS AND	DIRECTORS IN	V 10
NAME NORTON, JOY		☐ Delete	TITLE	}	<u></u> _	رسد و رسد و و	☐ Change	===:::
STREET ADDRESS 1372 WOODFIELD C			1	ADDRESS IT-ZIP	12717/	914849	3   3  03 **6	.25
TITLE S NAME BALLEY INGRID		☐ Delete	TITLE				☐ Change	
NAME BAILEY, INGRID STREET ADDRESS 1015 BRANDERMILL			NAME	4DDDCCC				
CITY-ST-ZIP CANTONMENT, FL.		CITY-S	ADDRESS { 1-ZIP					
NAME REID, STARLA		Delete	TITLE				☐ Change	<u> </u>
STREET ADDRESS 538 PINEBROOK CIF		NAME STREET	ADDRESS (					
CITY-ST-ZIP CANTONMENT, FL	32533		CITY-S1	,				
NAME TOWNSEND JOHN	TOWNSEND, JOHN		TITLE				☐ Change	☐ Assilist ,
STREET ADDRESS   1536 SILVER RIDGE	ADDRESS 1536 SILVER RIDGE DR.		NAME STREET A	ADORESS				
CITY-ST-ZIP CANTONMENT, FL 3	32533		CITY-ST	1				ì
TITLE		☐ Delete	TITLE			<del> </del>	☐ Change	Addition
STREET ADDRESS			NAME STREET A	ODRESS				
CITY-ST-ZIP			CITY-ST	-ZIP				
TITLE		☐ Delete	TITLE			<del></del>	☐ Change	Addition
STREET ADDRESS			NAME STREET A	DDRESS /				
City-St-ZIP			CITY-ST	- ZIP				
12. I hereby certify that the information indicated on this report or supplementation	P 1 20 112 201	does not qualify to	r the even	ations contained	in Chanta 440 Flat			nformation
of the corporation or the receiver or	trustee empowered to	executate and mat m						
	trustee empowered to	executate and mat m						