

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 NOV 24 AM 8:00

DOCUMENT # 1197000002662

1. Corporation Name

Glades Baseball & Softball League, Inc.

3876 SW 112 Avenue
3876 SW 112 Avenue

2. Principal Office Address

3876 SW 112 Avenue

3. Mailing Office Address

3876 SW 112 Avenue

Suite, Apt. #, etc.

#17

Suite, Apt. #, etc.

#17

City & State

Miami, FL

City & State

Miami, FL

Zip

33165

Country

USA

Zip

33165

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida 1997**

5. FEI Number
650757373

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status**

REINSTATEMENT 03-04

MR28

7. Name and Address of Current Registered Agent

Name

Vickie Taylor

Street Address (P.O. Box Number is Not Acceptable)
4980 Westwood Lake Drive

Suite, Apt. #, Etc.

City

Miami

State
FL

Zip Code
33165

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Vickie Taylor

REGISTERED AGENT MUST SIGN

Date

11/22/04

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Bill Richards	13535 SW 113 Court	Miami, FL 33176
V	Jorge Alvarez	9821 SW 16 Terrace	Miami, FL 33176
T	Vickie Taylor	4980 Westwood Lake Drive	Miami, FL 33165

10. 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:

Vickie M. Taylor

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/22/04

Daytime Phone #

305-645-5076

CR2E081 (01/04)