

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JAN 15 PM 1:58

RECEIVED BY STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N9900000 1367

1. Corporation Name

South Brevard Pop Warner
Little Scholars, Inc

2. Principal Office Address

350 Epping Ct NE

Suite, Apt. #, etc.

City & State

Palm Bay, FL

Zip

32907

Country

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

Zip

Country

300010135873
01/15/03--01080--007 **175.00
REINSTATEMENT 2002

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

3/15/99

5. FEI Number

23 1582287

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Patricia Kraynik

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

350 Epping Ct NE

Suite, Apt. #, Etc.

City

Palm Bay, FL 32907

State
FL

Zip Code

32907

04/22/02 90123 009 \$ 61.25

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**

Patricia Kraynik

REGISTERED AGENT MUST SIGN

Date

12/16/02

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
D	Patricia Kraynik	350 Epping Ct NE	Palm Bay, FL 32907
D	Bob Doyne	1590 Alberni St NE	Palm Bay, FL 32907
D	Jeb Stewart	2381 Oaklyn St NE	Palm Bay, FL 32905

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:

Patricia Kraynik Patricia Kraynik

Date

Daytime Phone #

321-676-2795

CR2E081 (10/02)