PLEASE READ	ALL INSTRUCTIONS BEFORE C	OMPLETING THIS FORM.
APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State Division of Corporations	PILED GEGRETARY OF STATE #VISION OF CORPORATION
DOCUMENT # N990C	0007570	00 0CT 20 PH 12: 16
SKATEBOARDING ASSOCIAT	ION OF AMERICA, INC.	
Principal Place of Business	Mailing Address	
6140 ULMERTON RD. CLEARWATER FL 33760	6140 ULMERTON RD. CLEARWATER FL 33760	
	rough incorrect information and enter correction below.	DEINSTATEMENT 00
2. New Principal Office Address, If Applicable	Suite, Apt. #, etc.	4. Date Incorporated or Qualified To Do Business in Florida 12/20/1999
Suite, Apt. #, etc.	City & State	5. FEI Number Applied For 59361.008.8 Not Applicable
Zip Country	Zip Country	6. CERTIFICATE OF STATUS DESIRED Status
7. Names and Street Addresses of Each Officer and	/or Director (Florida nonprofit corporations must list at lea	
Title(s) Name of Officers and/or Directors	Street Address of Each Officer and/or Director 3	
D/D Dean Dupre D/D Rebecca Turner	6140 Ulmenton R Le140 Ulmenton R Le140 Ulmenton A	2d. Clearwater, A. 33760 Rd. Clearwater, A. 33760 05-15-00 90272 020 \$61.25
		$\begin{array}{c} \bullet & \bullet & \bullet & \bullet \\ \bullet & \bullet & \bullet & \bullet & \bullet \\ \bullet & \bullet &$
8. Name and Address of Current		9. Name and Address of New Registered Agent
TURNER, JAY 6140 ULMERTON RD. CLEARWATER FL 33760	Suite, Apt. #: Etc	· · · · · · · · · · · · · · · · · · ·
A hard a start and a start a st	City ove named corporation, am familiar with and accept the o	FL
Signature of Registered Agent	FURE REQUERED GISTERED AGENT MUST SIGN	Date
this reinstatement application, the reason for dis owed by the corporation have been paid and the	colution has been eliminated, the corporate name satisfies	
	INTED NAME OF SIGNING OFFICER OR DIRECTOR	10/16/00 -727-523-0785