

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV 24 PH 4:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P01000058946**

1. Corporation Name

BACK TO BASICS GOLF ACADEMY, INC.

Principal Place of Business

3200 SERALAGO BLVD.
KISSIMMEE FL 34746

Mailing Address

15445 PEBBLE RIDGE STREET
WINTER GARDEN FL 34787

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

15445 PEBBLE RIDGE ST

Suite, Apt. #, etc.

WINTER GARDEN, FL

City & State

34787

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/11/2001

5. FEI Number

59-3736318

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	HENDERSON, CHRISTOPHER	15445 PEBBLE RIDGE STREET	WINTER GARDEN FL 34787
VD	HENDERSON, WILLIAM	425 SOTHEBY WAY	DEBARY FL 32713
D	HENDERSON, WILLIAM	15445 PEBBLE RIDGE STREET	30 WINTER GARDEN FL 34787
			11/24/03--01018--022 **150.00
			300024948443
			11/24/03--01018--022 **150.00

8. Name and Address of Current Registered Agent

HENDERSON, CHRISTOPHER
15445 PEBBLE RIDGE STREET
WINTER GARDEN FL 34787

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Christopher Henderson

REGISTERED AGENT MUST SIGN

Date

11/3/03

11. 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:

Glenda E. Hood

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/3/03

Daytime Phone #

CR2E040 (7/03)



memo

Date: 11/3/03
To: Florida Department of State
From: Chris Henderson, President
RE: Corporation (FEI# 59-3736318)

We received the "Notice of Administrative Dissolution or Revocation" recently, not quite understanding why. We did not receive any prior notices regarding this 2003 annual report/uniform business report. We checked throughout the office, but only found the report for 2002, which we had paid.

Enclosed is our form and check for \$150.00 for our UBR filing fee.

If you have any questions or need more information, please call Cristine at our office (407) 654-3474.

Thank-you,

A handwritten signature in cursive script, appearing to read "Chris Henderson".