

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1/2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 SEP 25 PM 4:27

DOCUMENT # P02000084214

1. Corporation Name

Spirit Cheer

Tax ID # 043623243

300023338853
.09/25/03--01053--009 **150.00

2. Principal Office Address

195 Wekiva Springs Rd.

3. Mailing Office Address

Suite, Apt. #, etc.

#208

Suite, Apt. #, etc.

City & State

Longwood, FL

City & State

Zip

32779

Country

U.S.

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

last year 02

5. FEI Number

043623243

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

Michael Pane

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

320 Speyside Lane

Suite, Apt. #, Etc.

City

Apopka,

State
FL

Zip Code

32712

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

REGISTERED AGENT MUST SIGN

Date

9/19/03

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	Michael Pane	320 Speyside Lane Apopka FL 32712	
VP	Robert Eskridge	307 Springhill Dr.	Paris, Ky 40361
T	Sheri Pane	320 Speyside Lane Apopka, FL 32712	

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:

Michael Pane

9/19/03

407-772-0436

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (10/02)

9/26/03

Spirit
CHEER



9/19/03

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Uniform Business Report

Dear Division of Corporations:

Upon Notification from bank of America by opening a bank account I was informed that our corporate was status was inactive. At no time were we informed about this Uniform Business report or its fees. We still have not received any notification in regards to this and ask that you waive any and all fees associated with this.

Enclosed you will find payment to reinstate our business called Spirit Cheer and the filing fee of \$150 per my conversation with a representative from your office earlier today. I thank you in advance and look forward to your forthcoming response.

Sincerely,

Michael Pare
President
Spirit Cheer

"Inspiring the Next Generation of Athletes"

Post Office Box 915456
Longwood, Florida 32779
888-716-2287.toll free
407-772-0436.office
407-772-0578.fax
www.spiritcheer.com
www.ndforce.com