

Application for Reinstatement

APPROVED
AND
FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT 		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		97 APR 14 AM 10:02 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # P930000082445 1. Corporation Name DYNAMIC AMUSEMENT SOUTH, INC.					
Principal Place of Business Mailing Address 7696 301 Boulevard Sarasota, Florida 34243					
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, if Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Address, if Applicable 7696 301 Blvd. Suite, Apt. #, etc. City & State Zip Country		4. Date incorporated or Qualified To Do Business in Florida 12/2/93 5. FEI Number 65-0444727 6. CERTIFICATE OF STATUS DESIRED ☒ \$3.75 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)					
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip		
CEO	L. THOMAS TARANTELLI	739 Linden Avenue	Rochester, N. Y. 14625		
EVP	MARSHA A. TARANTELLI	739 Linden Avenue	Rochester, N. Y. 14625		
P	CATHERINE A. TARANTELLI	7696 301 Blvd.	Sarasota, Fl. 34243		
AVP	JOLENE C. YOUNG	7696 301 Blvd.	Sarasota, Fl. 34243		
S/T	CATHERINE A. TARANTELLI	7696 301 Blvd.	Sarasota, Fl. 34243		
A/S	JOLENE C. YOUNG	7696 301 Blvd.	Sarasota, Fl. 34243		
8. Name and Address of Current Registered Agent CATHERINE A. TARANTELLI 7696 301 Blvd. Sarasota, Fl. 34243			9. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box) _____ Suite, Apt. #, Etc. _____ City _____ State _____ 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. Signature of Registered Agent <u>C. A. Tarantelli</u> Date <u>4/14/97</u> Catherine A. Tarantelli REGISTERED AGENT MUST SIGN					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐ (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: <u>C. A. Tarantelli</u> Date <u>4/14/97</u> or <u>941-351-9878</u> Catherine A. Tarantelli or <u>941-351-5833</u>					

REINSTATEMENT

96-97
J. Alan
4-14-97