

JUN 11 1997 2:13PM

ARLENE JONES ET AL

No. 9228 P. 3/3

APPLICATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Andrea P. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 JUN 11 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000039794

1. Corporation Name

SARASOTA SPORTPARK, INC.

Principal Place of Business

1921 Waldermere St.
Sarasota, FL 34239

Mailing Address

P.O. Box 20307
Bradenton, FL 34203

800002211228--0
-06/13/97--01025--010
****585.00 ****585.00

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable

3. New Mailing Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

05/26/94

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FGI Number

Applied For

City & State

City & State

65-0495243

Not Applicable

Zip

Country

Zip

Country

CERTIFICATE OF STATUS DESIRED ☐

\$0.75 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
P	Snyder, Donald M.	1921 Waldermere St. #814	Sarasota, FL
T	Calhoon, Michael R.	6728 33rd Street E.	Sarasota, FL

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Michael Calhoon
9015 Sabal Palm Circle
Bradenton, FL 34202

Name

Michael R. Calhoon

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

6728 33rd Street E.

Suite, Apt. #, etc.

City

Sarasota

State

FL

Zip Code

34243

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0305, F.S.

Signature of
Registered Agent

M R Calhoon

REGISTERED AGENT MUST SIGN

Date

6.5.97

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:

M R Calhoon

6.5.97

041.756.0977