

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS



APPROVED  
AND  
FILED

DOCUMENT # 995000016224  
Corporation Name  
America's Winning Numbers Corporation

99 FEB 12 PM 2:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
5628 N.W. 57th Way 5628 N.W. 57th Way  
Gainesville, FL 32653-3250 Gainesville, FL 32653-3250

W99-2450

REINSTATEMENT 97-99

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05/02/95	
City & State		City & State		5. FEI Number	
Zip		Zip		59-3299744	
Country		Country		Applied For	
				Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$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)

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	Millard F. Benoit JR	5628 N.W. 57th Way	Gainesville, FL 32653-3250
<del>PP</del>			<del>Citrus, FL</del>

500002778175--1  
-02/17/99--01057--011  
\*\*\*1050.00 \*\*\*1050.00  
JBZ-12-99

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
Millard F. Benoit, JR. 5628 N.W. 57th Way Gainesville, FL 32653-3250		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.

Signature of Registered Agent	REGISTERED AGENT MUST SIGN	Date
<u>Millard F. Benoit Jr.</u>		01/22/99

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☒ No ☐ (See other side for information on intangible tax)

12. 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: Millard F. Benoit Jr. 1/22/99 (352) 335-6114  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (1/98)