

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03 DEC 23 AM 11:02

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P95000033508

**1. Corporation Name**

Orlando Sport and Social Club, Inc.

*SA*

**2. Principal Office Address**

1516 N. Fremont

Suite, Apt. #, etc.

City & State

Chicago, IL

Zip

60622

Country

USA

**3. Mailing Office Address**

1516 N. Fremont

Suite, Apt. #, etc.

City & State

Chicago, IL

Zip

60622

Country

USA

800025721318  
12/23/03--01019--003 \*\*1058.75  
**REINSTATEMENT** 01-03

**4. Date Incorporated or Qualified  
To Do Business in Florida**

4/24/95

**5. FEI Number**

364020912

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

Corporation Service Company

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

1201 Hays Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

**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

*Karin Dunn*

Karin Dunn

Date

12/15/03

REGISTERED AGENT MUST SIGN Authorized Rep.

**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	Jason Erkes	1516 N. Fremont	Chicago, IL 60622
V	Chris Hastings	1516 N. Fremont	Chicago, IL 60622
D	Ezra Simmons	525 London Road	Winter Park, FL 32792

**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:

*Chris Hastings* CHRIS HASTINGS

12/17/08

(312) 325-9556

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 241 505

CR2E081 (10/02)