

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
VISION OF CORPORATIONS

DOCUMENT # P96000098313

1. Corporation Name
Caldwell Motorsports, Inc.

59 MAY 28 AM 10:36

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
10380 42nd Street North
Clearwater, FL 34622

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

2. New Principal Office Address, If Applicable
6253 147th Ave. North
Suite, Apt. #, etc.
City & State
Clearwater, FL
Zip
33760
Country
USA

3. New Mailing Office Address, If Applicable
9713 109th Ave North
Suite, Apt. #, etc.
City & State
Largo, FL 33773
Zip
33773
Country
USA

4. Date Incorporated or Qualified To Do Business in Florida
12/02/96

5. FEI Number
59-3412959

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ \$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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PTD	Noell Caldwell	9713 109th Ave North Largo, FL 33773	Largo, FL 33773
USD	Kimberly Caldwell	9713 109th Ave North	Largo, FL 33773

900002898099--4
-06/08/99--01050--003
****300.00 ****300.00

8. Name and Address of Current Registered Agent

Kimberly Caldwell
6253 147th Ave North
Clearwater, FL 33760

9. Name and Address of New Registered Agent

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 *Noell Caldwell*
REGISTERED AGENT MUST SIGN

Date X 5/24/99

11. This corporation owes 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/24/99 (727) 580 0042
Date Daytime Phone #

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CALDWELL MOTORSPORTS
6253 147TH STREET NORTH
CLEARWATER, FL. 34622

FLORIDA DEPARTMENT OF STATE
KATHERINE HARRIS
SECRETARY OF STATE

APPLICATION FOR REINSTATEMENT

Attention: REINSTATEMENT DEPARTMENT

Enclosed is the application for reinstatement and a check in the amount of \$300.00. I further request that previous fees be waived in the reinstatement process due to the following reason. An annual renewal report was not received from the Department of State. During the existence of Caldwell Motorsports Inc. the corporation has been diligent and timely in it's filing requirements with this event as an exception.

If you should have any questions or require any additional information please contact David Teacher at 813-643-1609.

Sincerely

Noell Caldwell