


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE
		Katherine Hafris Secretary of State DIVISION OF CORPORATIONS

FILED

28 APR 30 AM 8:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000068754 (5)

1. Corporation Name

The Easy League, Inc.

Principal Place of Business	Mailing Address
830 9th St. South Jacksonville Beach, FL 32250	P.O. Box 51227 Jacksonville Beach FL 32250

REINSTATEMENT

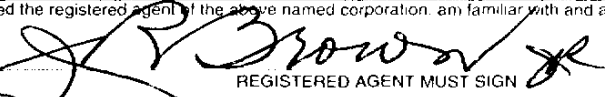
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ad

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 08/08/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 59-3471840	
City & State		City & State		Applied For	
Zip		Country		Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				S8.75 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/T	Cecil R. Glenn	857 8th Ave. South	Jacksonville Beach, FL 32250
VP	Elliott Richelson	109 Teal Pointe Lane	Ponte Vedra Beach, FL 32082
S	J. R. Brown, Jr.	29 Solana Road	Ponte Vedra Beach, FL 32082

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
J		Name J. R. Brown, Jr.	
		Street Address (P.O. Box Number is Not Acceptable) 830 9th St. South	
		Suite, Apt. #, Etc.	
		City Jacksonville Beach State FL Zip Code 32250	

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 	Date 4/28/99
REGISTERED AGENT MUST SIGN	

11. This corporation owes the current year Intangible Personal Property Tax due June 30.		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	(See other side for information on intangible tax.)
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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: 	4/21/99	904-270-0026
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #

CR2E081 (12/98)