

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1093



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P98000026928

1. Corporation Name

JUMPING JACK ACADEMY SCHOOL, INC.

Principal Place of Business

JUMPING JACK ACADEMY SCHOOL  
DAY CARE  
ORLANDO FL 32805

Mailing Address

903 PLYMOUTH AVE.  
DAYCARE  
ORLANDO FL 32805

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

03/20/1998

5. FEI Number

59-3500866

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status



07/17/02 90114 037 \$150.00

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
DPS	WILCOX, CHARLENE	903 PLYMOUTH AVE.	ORLANDO FL 32805
DV	WILCOX, LARRY	903 PLYMOUTH AVE.	ORLANDO FL 32805

8. Name and Address of Current Registered Agent

JUMPING JACK ACADEMY SCHOOL  
903 PLYMOUTH AVE.  
ORLANDO FL 32805

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. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED

Date

REGISTERED AGENT MUST SIGN

11. 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/1/02

CR2E040 (8/02)

20f3

**DONNELL ACADEMY SCHOOL, INC**  
**P98000026928**

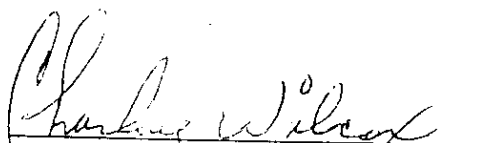
June 08, 2002

Department of State  
Division of Corporations  
PO BOX 6327  
Tallahassee, FL 32314

To whom it may concern:

Please waive the \$550 Penalty for not filing the Uniform Business on time. I had not paid because I did not receive it until now.

Thank you for your attention,

  
\_\_\_\_\_  
CHARLENE WILCOX - PRESIDENT

**JUMPING JACK ACADEMY SCHOOL, INC**  
**DOC. # P98000026928**

OCTOBER 28, 2002

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
PO BOX 6327  
TALLAHASSEE, FL 32314

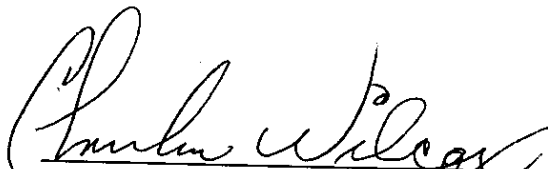
TO WHOM IT MAY CONCERN:

ON JULY 11, 2002 I SENT THE UNIFORM BUSINESS REPORT WITH THE \$150.00 CORPORATION FEE(COPY ATTACHED). I SENT IT WITH A LETTER REQUESTING THE WAIVE OF THE REINSTATEMENT FEE BECAUSE I HAD NOT RECEIVE THE UNIFORM BUSINESS REPORT ON TIME(COPY ATTACHED). I WAS TOLD BY PHONE THAT A LETTER OF REJECTION WAS SENT TO ME ON JULY 19, 2002, BUT I NEVER RECEIVED IT. PLEASE WAIVE THE REINSTATEMENT FEE.

AT THAT TIME THE COMPANY HAD A DIFFERENT NAME (DONNELL ACADEMY SCHOOL, INC) BUT THE NAME WAS CHANGED ON AUGUST 1, 2000. BUT AS YOU CAN SEE IN THE ARTICLE OF AMENDED THE ADOPTION DATE OF THE AMENDED WAS JANUARY 1, 2000(COPY ATTACHED).

PLEASE UPDATE YOUR RECORD.

THANK YOU FOR YOUR ATTENTION,

  
CHARLENE WILCOX, PRESIDENT