

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

99 OCT 21 PM 12:03

DOCUMENT # P98000082869

1. Corporation Name

VERO BEACH SPORTS, INC.

Principal Place of Business

2120 58TH AVENUE #124  
VERO BEACH FL 32966

Mailing Address

2120 58TH AVENUE #124  
VERO BEACH FL 32966

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

2. New Principal Office Address, If Applicable

~~6200 20TH STREET~~  
Suite, Apt. #, etc. ~~#210~~

3. New Mailing Office Address, If Applicable

~~6200 20TH STREET~~  
Suite, Apt. #, etc. ~~#210~~

City & State

VERO BEACH, FLORIDA

City & State

VERO BEACH, FLORIDA

Zip

32966

Country

USA

Zip

32966

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

09/23/1998

5. FEI Number

65-0865541

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	ALLEN, JOHN	1950 WESTMINSTER CIRCLE #A	VERO BEACH FL 32966
D	ALLEN, JOHN	4983 4TH LANE	VERO BEACH, FL 32968
D	CAMPBELL, ROBERT	1306 CORAL PARK LANE	VERO BEACH, FL 32963
D	GRUSKLAGS, BRETT	1302 CORAL PARK LANE	VERO BEACH, FL 32963
			400003032234--7 -11/02/99--01051--013 ****50.00 ****50.00 8/10/99

8. Name and Address of Current Registered Agent

ALLEN, JOHN  
2120 58TH AVENUE #124  
VERO BEACH FL 32966

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

REGISTERED AGENT MUST SIGN

Date 10-15-99

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-15-99  
Date

561-770-4653  
Daytime Phone #