## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



P98000098366

## FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## DIVISION OF CORF

1. Corporation Name

DOCUMENT #

## BALL OUTDOOR ADVERTISING, INC.

32514 OKALOOSA TRAIL

Principal Place of Business

Mailing Address

32514 OKALOOSA TRAIL SORRENTO EL 32776



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SECRETARY OF STATE TALLAHASSEE, FLORIDA



SORRENIC	, L. 32110		nrough incorrect information and enter correction below.  3. New Mailing Office Address, If Applicable			4-Dete Incorporated or Qualified To Do Business in Florida			
	addresses are incorrectincipal Office Address,								
Suite, Apt. #, etc.			Suite, Apt. #, etc.			- TO BO Busi	11/17/1998		
							5. FEI Number Applie 59–3542930		Applied For
City & State			City & State		IN IN		Not Applicable		
Zip	Count	ry	Zip		Country	6. CERTIFICAT	E OF STATUS DESIRE		itional Fee required rtificate of Status
7. Names	and Street Addresses	of Each Officer and	d/or Director (Flo	orida nonprof	it corporations must list at l	east 3 directors)			
Title(s) Name of Officers and/or Directors 1 2		3		Street Address of Ea Officer and/or Direct		City / State / Zip			
D	BALL, DOUGLAS C			32514 OKALOOSA TRAIL		<del></del> -	SORRENTO FL	32776	
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						STATE	RENT	1	
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					<u>QEINS</u>	21		<u> </u>	
					# -				
	8. Name and A	ddress of Curren	t Registered Ag	ent	Name	9Name and	Address of New Rec	gistered Agent	
Y <del>MA CI</del> N	ER. LYNN E				loug	1/45 (	- 15ALL		CR2E040 (8899)
	<del>UMRELL, WAONER-</del>	A COCTADEL 1	4 D		Street Address		is Not Acceptable)	TRAIL	HONE
-	MATERIA PATE D	•	er =99£		Suite Apt. #, E	drila	2077 /	7207-	
2100	4167 - Carrier 74				2	Ma		Tour Take	
	g appointed the registe	rod agont of the al	novo named core	tration and to		ento	607.0505, F.S.		2776
Signature of Registered			REGISTERED A		augho Co	Gell	Date ###	当/	14-00
			- (	SERT WOOT	51617				
this rei	nstatement application, by the corporation bave	the reason for disable to the paid and the	solution has been names of individ	duals listed of	execute this application as the corporate name satisfie in this form do not qualify fo legal effect as if made und	es the requirements or an exemption un	of section 607.0401	or 617.0401, F.	S., that all fees
SIGNA		augh	as ()		March 1	A AL	1	<b>949</b> 35	2-383~
JIGHA	SIGNATURE	AND TYPED OR PE	NINTED NAME OF	SIGNING OFFI	CER OR DIRECTOR	Ha	n / L Ja	Daytime P	2-383- hone #