

DATE: 01/17/2008

DOCUMENT ID 200801602766

DESCRIPTION DOMESTIC/REINSTATEMENT (REN)

PENALTY

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Receipt

This is not a bill. Please do not remit payment.

NORTH CANTON YMCA GYMNASTICS BOOSTERS ASSOCIATION, INC. 7241 WHIPPLE AVE NW NORTH CANTON, OH 44720

STATE OF OHIO

CERTIFICATE

Ohio Secretary of State, Jennifer Brunner

502616

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

NORTH CANTON YMCA GYMNASTICS BOOSTERS ASSOCIATION, INC.

and, that said business records show the filing and recording of:

Document(s)

DOMESTIC/REINSTATEMENT

Document No(s):

200801602766



State of Ohio Office of the Secretary of State Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 11th day of January, A.D. 2008.

Ohio Secretary of State



Prescribed by :

Ohio Secretary of State

Expedite this Form: (Select One) Mail Form to one of the Following: Central Ohio: (614) 466 2019 1 1 2 2 PO Box 1390

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REINSTATEMENT

REINSTATEMENT					
(For Domestic or Foreign, Profit or Nonprofit)					
Filing Fee \$25.00					
THE UNDERSIGNED DESIRING TO FILE A:					
(CHECK ONLY ONE (1) BOX)					
(1) Reinstatement & Appointment of Agent (for failure to maintain a statutory agent)		statement & Appointment of nt for a Foreign Corporation		(3) Reinstatement of a Nonprofit Corporation (for failure to file a statement of continued	
(108-REN) (111-FREA)				statement of continued 09-RENN)	
(4) Reinstatement of a Registered Partnership Having		(5) Reinstate	ement of a Profe	essional Corporation	
Limited Liability		(for failure to file annual or biennial reports)			
(for failure to file annual or biennial reports) (112-PLR) THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT ANNUAL OR BIENNIAL REPORTS WITH FILING FEES		(110-RENP) THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT ANNUAL OR BIENNIAL REPORTS WITH FILING FEES			
Complete All of the gapped information is this section for the bounded show					
Complete ALL of the general information in this section for the box checked above. Name of Entity North Control YMCA Gumnostics Boosters Association Trc. Charter or					
Registration No. 502/010					
- ·					
Cancellation Date The entity was canceled on (list date): 11-18-1985 (Date)					
Complete the information in this section if box (1) or (2) is checked.					
Name and Address of	1, , 1,,,,	•			
New Agent (if applicable)	(Name)				
	(Street)	NOTE: P.O. Box A	ddresses are NO7	acceptable.	
			Ohio		
	(City)		(State)	(Zip Code)	
ACCEPTANCE OF APPOINTMENT					
The Undersigned,				, named herein as	
the Statutory agent for,				·	
hereby acknowledges and accepts the ap-	pointment of statutory age	ent for said entity	'.		
Signature:					
(Statutory Agent)					
REQUIRED Must be authenticated (signed) by an authorized representative (See Instructions)	Authorized Representativ	<u>Indews</u>	WC)	1-8-08 Date	
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