


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<p><b>APPLICATION FOR REINSTATEMENT</b></p>	 <p><b>FLORIDA DEPARTMENT OF STATE</b> Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p>	<p style="text-align: center;"><b>FILED</b></p> <p style="text-align: center;">96 NOV -4 AM 10: 38</p> <p style="text-align: center;">SECRETARY OF STATE TALLAHASSEE, FLORIDA</p> <p style="text-align: center;">800002000008--1 -11/03/96--01021--010 ****367.50 ****367.50</p>																												
<p><b>DOCUMENT # 716462</b></p> <p>1. Corporation Name <i>The First Baptist Church of Buckingham, Inc.</i></p>		<p style="text-align: center; font-size: 2em; font-weight: bold;">REINSTATEMENT 94-96</p>																												
<p>Principal Place of Business      Mailing Address</p> <p><i>12860 Orange River Blvd → 3414 15th St W Ft. Myers, Fla.      Lehigh, Fla 33905      33971</i></p> <p>If above addresses are incorrect in any way, line through incorrect information and enter correction below.</p>																														
<p>2. New Principal Office Address, if Applicable</p> <p>Suite, Apt. #, etc.      3. New Mailing Address, if Applicable</p> <p><i>205 E Joel Blvd #110</i></p>		<p>4. Date Incorporated or Qualified To Do Business in Florida</p> <p><i>3/20/1969</i></p>																												
<p>City &amp; State</p> <p><i>Lehigh, Fla</i></p>		<p>5. FEI Number</p> <p><i>59-6499399</i></p>																												
<p>Zip      Country</p> <p><i>33936      Lee</i></p>		<p>6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/></p>																												
<p>7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">Title(s)</th> <th style="width:30%;">Name of Officers and/or Directors</th> <th style="width:30%;">Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)</th> <th style="width:30%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td><i>T</i></td> <td><i>Robert Bowers</i></td> <td><i>314 Vermont Way</i></td> <td><i>Lehigh, FL. 33970-0159</i></td> </tr> <tr> <td><i>D</i></td> <td><i>Verdie Parker</i></td> <td><i>45 Williamson Rd.</i></td> <td><i>Ft. Myers, FL.</i></td> </tr> <tr> <td><i>D</i></td> <td><i>James Patterson</i></td> <td><i>173 Morse Plaza</i></td> <td><i>Ft. Myers, FL.</i></td> </tr> <tr> <td><i>D</i></td> <td><i>James Morrison</i></td> <td><i>305 Melody Ct.</i></td> <td><i>Ft. Myers, Fla.</i></td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip	<i>T</i>	<i>Robert Bowers</i>	<i>314 Vermont Way</i>	<i>Lehigh, FL. 33970-0159</i>	<i>D</i>	<i>Verdie Parker</i>	<i>45 Williamson Rd.</i>	<i>Ft. Myers, FL.</i>	<i>D</i>	<i>James Patterson</i>	<i>173 Morse Plaza</i>	<i>Ft. Myers, FL.</i>	<i>D</i>	<i>James Morrison</i>	<i>305 Melody Ct.</i>	<i>Ft. Myers, Fla.</i>								
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<p>8. Name and Address of Current Registered Agent</p> <p><i>Wayne Beehler</i> <i>3414 15th Street West.</i> <i>Lehigh, Fla 33971</i></p>		<p>9. Name and Address of New Registered Agent</p> <p>Name</p> <p>Street Address (P.O. Box Number is Not Acceptable)</p> <p>Suite, Apt. #, Etc.</p> <p>City      State      Zip Code</p> <p>   <b>FL</b></p>																												
<p>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.</p> <p>Signature of Registered Agent: <i>X Wayne Beehler</i>      Date: <i>10/29/96</i></p> <p style="text-align: center;">REGISTERED AGENT MUST SIGN</p>																														
<p>11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes.    Yes <input type="checkbox"/>    No <input checked="" type="checkbox"/>    (See other side for information on intangible tax.)</p>																														
<p>12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.</p>																														
<p>SIGNATURE: <i>Robert Bowers</i></p> <p style="text-align: center;">SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</p>		<p>Date: <i>10/29/96</i>      Daytime Phone #: <i>941-368-1505</i></p>																												

CR20040 (12/95)