

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

98 JUN 30 PM 1:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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-07/01/98--01100--004  
\*\*\*\*297.50 \*\*\*\*297.50

DOCUMENT # 716765

1. Corporation Name

THE ORLANDO UNION RESCUE MISSION

Principal Place of Business

Mailing Address

1521 W. Washington Street  
Orlando, Florida 32805

P. O. Box 2791  
Orlando, Florida 32802

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

REINSTATEMENT 97-98

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

06/17/1969

5. FEI Number

59-1035082

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)

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
1	2	3	4
D/ Pres.	Wiggins, M. J.	1800 S. W. 55th Rd.	Ocala, FL 32674
D/ V. Pres.	Clayton, Joan	1190 Park Street N.	Winter Park, FL 32789
D/ Sect.	Brock, Della	1431 Casa Rio Dr.	Orlando, FL 32825
D/ A. Sect.	Eldson, Ann	2807 Edgewater Drive	Orlando, FL 32804
D/ Tres.	Wallace, R. Hugh	2365 Winter Park Rd.	Winter Park, FL 32789
D/ A. Tres.	Smith, Michael	306 E. Princeton	Orlando, FL 32804

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Don Moody, Executive Director  
1521 W. Washington Street  
Orlando, FL 32805

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

Don Moody - Executive Director  
REGISTERED AGENT MUST SIGN

Date 6-28-98

11. This corporation owes or has paid the current year  
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information  
on intangible tax.)

12. 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:

Michael W. Smith  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
MICHAEL W. SMITH

6-28-98

Date

407-598-4101  
Daytime Phone #