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
01 OCT 26 AM 10:21

DOCUMENT # 741842

1. Corporation Name

LONGWOOD CHURCH OF THE NAZARENE, LONGWOOD, INC.

Principal Place of Business	Mailing Address
200 N WAYMAN ST LONGWOOD FL 32750 US	200 N WAYMAN ST LONGWOOD FL 32750 US

200004677632--2
-11/14/01--01001--026
*****61.25 *****61.25

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida: 02/28/1978

5. FEI Number: 59-1875954 ☐ 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
P	HOLDEN, JAMES B	621 HERMITS DR	ALTAMONTE SPRINGS FL 32701
~~T~~ S/T	~~SMITH, JOHN~~ Nimmo, Carol	~~7040 OVERLOOK WAY~~ 557 Pasadena Ave.	~~WINTER SPRINGS FL 32708~~ Longwood, FL 32750
~~T~~	~~MORSE, P~~	~~117 ALMA~~	ALTAMONTE SPRINGS FL 32714
T	BERKOWITZ, HENRY	456 PONCE DE LEON DR	WINTER SPRINGS FL
T	BLEICHNER, BRIAN	636 MAGNOLIA ST.	LONGWOOD FL 32750

8. Name and Address of Current Registered Agent

HOLDEN, JAMES B
621 HERMITS TR.
ALTAMONTE SPRINGS FL 32701

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

CR2E040 (8/01)

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: X James B. Holden Date: 10-22-01
REGISTERED AGENT MUST SIGN

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: X Rev. James B. Holden 10-22-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

To Whom It May Concern:

I received this form for reinstatement. I Carol Nimmo have only been in the Secretary position since March. I have not had anything to come across my desk to do the report. I being new was not aware to be looking for something as this. I know now. So I am in hopes you will let me send in the report and pay our money as expected. I have enclosed the report and check. If you have any questions please contact me at Longwood Church of the Nazarene. 407-831-8558

Thank you,

Carol Nimmo Sec./Treas.

Carol Nimmo

First Church of the Nazarene
200 Wayman Street
Longwood, FL 32750