


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 APR 25 PM 3:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N44349**

1. Corporation Name
Riverside Baptist Church OA
Gilchrist County, Inc.

200054203002
05/10/05--01038--002 **\$61.25

2. Principal Office Address 10760 NW 5th Ave Suite, Apt. #, etc.		3. Mailing Office Address 658 Longhorn Terrace Suite, Apt. #, etc.	
City & State Branford, Fl 32008		City & State Fort White, Fl	
Zip 32008	Country USA	Zip 32038	Country USA

4. Date Incorporated or Qualified To Do Business in Florida **07-18-91**

5. FEI Number
59-3096602

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee req. for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Jimmy Padgett

Street Address (P.O. Box Number is Not Acceptable)
*** 658 Longhorn Terrace**

Suite, Apt. #, Etc.

City
Fort White, FL

State
FL

Zip Code
32038

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent *Jimmy Padgett* Date 04-18-05
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
CD	Brooks, David R	12979 NE 5th Ave	Branford, FL 32008
SD	Padgett, Jimmy	658 Longhorn Terrace	Fort White, FL 32038
D	Thomas, Loyd	2191 NW 87th Place	Bell, FL 32619
D	Boswell, Andrew S	23854 HWY 129	O'Brien, FL 32071
D	Thomas, Roy	9749 NW 19th Ave	Branford, FL 32008
D	Sullivan, Allen	17 NE CR 138	Branford, FL 32008

10. 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: *David R Brooks* Date 04-18-05 (386) 935-0181
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR