

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
01 DEC 10 AM 9:35
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # *14500004245*

1. Corporation Name

South Florida Progressive Primitive Baptist District Association, Inc.

2. Principal Office Address

1223 N. Nebraska Avenue

Suite, Apt. #, etc.

City & State

Tampa, Florida

Zip

33602

Country

Hillsborough

3. Mailing Office Address

1223 N. Nebraska Avenue

Suite, Apt. #, etc.

City & State

Tampa, Florida

Zip

33602

Country

Hillsborough

**4. Date Incorporated or Qualified
To Do Business in Florida**

September 6, 1995

5. FEI Number

59-3331471

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Dr. Willie J. Williams

Street Address (P.O. Box Number is Not Acceptable)

1223 N. Nebraska Avenue

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33602

100004745781--6

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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

Willie J. Williams

REGISTERED AGENT MUST SIGN

Date *12/7/2001*

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
P, D	Willie J. Williams	2503 East 21st Avenue	Tampa, Florida 33605
S, D	Isaac Thomas	26372 Asuncion Drive	Punta Gorda, Florida 33983
T, D	Willie D. Pugh	48 Holiday Manor	Haines City, Florida 33844
D	Vincent L. Shannon	1345 N. Webster Avenue	Lakeland, Florida 33805
D	Mitchell L. Dawkins	3717 Jericho Drive	Castleberry, Florida 32707
D	Vernon J. Donaldson	2450 North 10th Street	Haines City, Florida 33844
D	Alfonso Ware	3001 36th Avenue South	St. Petersburg, FL 33712

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:

Willie J. Williams President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12-7-2001 813-241-0176

CR2001 (9/00)