

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 AUG 31 PM 4: 23

DOCUMENT #

NA7000005333

1. Corporation Name

Restoration Full Gospel Baptist Church, Inc.

WO1-19051

2. Principal Office Address

900 W Cervantes

Suite, Apt. #, etc.

City & State

Pensacola, FL

Zip

32501

Country

USA

3. Mailing Office Address

900 W Cervantes

Suite, Apt. #, etc.

City & State

Pensacola, FL

Zip

32501

Country

USA

REINSTATEMENT

99-01

4. Date Incorporated or Qualified
To Do Business in Florida

1998

5. FEI Number

59-3473401

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

Rev. Leon Rankins, III

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

3013 Tiquanes Place

Suite, Apt. #, Etc.

City

Pensacola

State

FL

Zip Code

32501

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

Rev. Leon Rankins, III

Date

7/16/01

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
D	Edna Ruth Rankins	7153 Rampart Way	Pensacola, FL 32501
T	Joyce Arnold	905 North 46th	Pensacola, FL 32506
T	Derrick Butler	1201 North Vandewer	Pensacola, FL 32505

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

Rev. Leon Rankins, III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(850) 436-4800