

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR 97-98
REINSTATEMENT



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

MOVED
AND
FILED

98 APR 21 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 761911

1. Corporation Name

CHURCH OF SCIENTOLOGY OF ORLANDO, INC.

Principal Place of Business

(same)

Mailing Address

1830 E COLONIAL DRIVE
ORLANDO, FL 32803

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

August 6, 1982

5. FEI Number

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)

600002498586--7

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City, State, Zip
PRES. Director	Nancy S. Goodwin	1830 E COLONIAL DR	ORLANDO, FL 32803
Treas. Director	Myrna Hand	1407 WOODWARD ST	ORLANDO, FL 32803
Director	Roger Akiyama	349 W 48TH ST.	NY, NY 10036
Secretary	Sherry Foster	8211-51 Sun Spring Circle	ORLANDO, FL 32825

REINSTATEMENT 97-98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

DUSTIN ANDERSON
423 CLEVELAND ST
CLEARWATER, FL 33755

Name
NANCY S. GOODWIN
Street Address (P.O. Box Number is Not Acceptable)
1830 E COLONIAL DR
Suite, Apt. #, Etc.
City
ORLANDO
State
FL
Zip Code
32803

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

Date April 20, 1998

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:

Nancy S. Goodwin April 20, 1998

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

407-895-9917

CR2040 (1/98)