PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 701315

1. Corporation Name

GREATER MIAMI YOUTH FOR CHRIST INC

Principal Place of Business

Mailing Address

9350 SW 79TH AVENUE MIAMI FL 33156-7431

PO BOX 561101 MIAMI FL 33256

FILED 03 DEC 23 PH 12: 54 SECRETARY OF STATE TALLAHASSEE, FLORIDA



If above a	ddresses are incorrect in any way, line th	rouah incorrect ir	nformation and ente	er correction below.	REIN	STATEMEN	VT 2003	
			ng Office Address, If Applicable		Date Incorporated or Qualified To Do Business in Florida			
Suite, Apt. #, etc. Suite, Apt. #					5. FEI Numbe		Applied For	
City & State City & State			~_··			59-6033466 Applied FC		
Zip Country Zip		Zip	Country		6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status			
7 Names	and Street Addresses of Each Officer and	Vor Director /Flo	vrida popprofit corne	prations must list at los	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		and the second s	
Title(s)	Names and Street Addresses of Each Officer and/or Director (Flo Name of Officers and/or Directors		Street Address of Each Officer and/or Director		<u> </u>	City / State / Zip		
SD	STOKES, PAUL M		2 SOUTH BISCAYNE BLVD. #3750		MIAMI FL 33131			
-TD	TD BROWN, GEORGE R JR		0221 SW 70TH ST			MIAMI EL 23173		
CD	BROWN, GEORGE R JR		9221 SW 70TH ST		MIAMI, FL 3	×3173		
D	BABCOCK, CALVIN H		10105 SW 94 COURT		MIAMI FL 33176	,		
₩ TD	BRONSON, DANIEL B BENGTSON, STURE	8520 SW 147TH STREET 10820 SW 74T CT		MIAMI FL 33158 MIAMI FL 331	56			
- CD	PEREZ. CLAUDIO M	9950 SW 170 ST		MIAMI FL 33161				
VĎ	MCLELLAN, JOHN	7330 SW 140™ TERR		MIAMI, FL 33	158			
- D	BAJOS, ORLANDO L	13015 SW 80 PL		MIAMI FL 33176				
D	BAJOS, ORLANDO L			#301	MIAMI, FL 3			
8. Name and Address of Current Registered Agent				Name and Address of New Registered Agent Name				
STOKES, PAUL ATTY 2 SOUTH BISCAYNE BLVD.				ľ	Street Address (P.O. Box Number is Not Acceptable)			
SUITE	#3750	Suite, Apt. #, Etc.		400025689924***********************************		324** 33 133 **245.00		
mani i E 00101			City		Stat F1			
10. I, being Signature of Registered	g appointed the registered agent of the ab	ove named corpo	oration, am familiar	with and accept the o	bligations of Sect	tion 607.0505, F.S. or 617.05	05, F.S.	

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 filling 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.

REGISTERED AGENT MUST SIGN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

1 OX

GREATER MIAMI YOUTH FOR CHRIST, INC.

Attachment Sheet for additional Directors - not listed in Block 7 due to lack of space

Title(s) Name of Director 1 2

Address

City/State/Zip

D	MAXEY, TOM	3001 PONCE DE LEON BLVD	CORAL GABLES, FL 33134
D	THATCHER, JOHN	PO BOX 370129	MIAMI, FL 33137