CORPORATION
DEINICTATEMENT



## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

## FILED

01 JAN 22 AM 9: 45

SECRETARY OF STATE TALLAHASSEE, FLORIDA

**DOCUMENT #** 

1. Corporation Name

Bartow Florida Congregation of Jehovahs Witnesses, Inc.

			<u> </u>	
Principal Office in 1810 S.	Address Davis Ave.	3. Mailing Office Ac		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
Bartow, FL		City & State	City & State Bartow, FL	
33830	Country II S	Zip 3 3 8 3 0	Country	

33830

REINSTATEMENT 93-01

4. Date Incorporated or Qualified To Do Business in Florida 04/16/1962 5. FEI Number Applied For 59-2864556 Not Applicable

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent Kenneth E. Goff Street Address (P.O. Box Number is Not Acceptable)
5 1 5 South Oak Avenue <u>9000036183</u>79 Suite, Apt. #, Etc. -02/01/01--01013-\*\*\*\*\*726.25 City State Zip Code Bartow 33830

US

11-200010

8. I, being appointed the

Signature of Registered Agent

US

h, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

REGISTERED A ENT MUST SIGN Date Jan 15, 200

9. Names and Street Addresses of Each Officer and/or Director Porida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Titles Street Address of Each City / State / Zip Officer and/or Director ΤP Robert Dominique 1810 S. Davis Avenue Bartow, FL 33830 ΤV Dennis Love 1810 S. Davis Avenue Bartow, FL 33830 TSKenneth Goff 515 South Oak Avenue Bartow, FL 33830

10. I certify that I am an officer of the 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 eason 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 by the paid and the times 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 the paid accurate and my sunature fall have the same legal effect as if made under oath.

SIGNATURE AND TYPED OR PR

Kenneth E. Goff ED NAME OF SIGNING OFFICER OR DIRECTOR