

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # 704256

1. Corporation Name
The Old Saint Holiness Church of the
Apostolic Faith, Inc.

Principal Place of Business Mailing Address
1112 North "D" Street
Pensacola, Fla. 32501

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

07/06/1962

5 FEI Number

271404148

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)

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
President	Gloria Locke	1114 North "D" St.	Pensacola, FL 32501
nat'l trustee	Jessie L. Brewer	1703 W. Brainerd St	Pensacola, FL 32501
Evangelist	Elmore Locke, III	1114 North "D" St	Pensacola, FL 32501
Vice Pres.	James McNeal	3207 Torres Ave	Pensacola, FL
Bishop	Johnnie Brewer	1520 W. Jackson St	Pensacola, FL 32501
Trustee	Anthony A. Franklin	3515 La Borda Lane	Pensacola, FL

8. Name and Address of Current Registered Agent

Overseer Gloria D. Locke
1114 North "D" Street
Pensacola, Fla. 32501

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc

City

400002793664--E

03/03/99--01084--001

****735.00 ****735.00

FL

State Zip Code

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

Overseer Gloria D. Locke
REGISTERED AGENT MUST SIGN

Date

03/03/99

11. This corporation owes 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:

Overseer Gloria D. Locke
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/03/99
Date

852-433-2511
Daytime Phone #

C92E081 (12/98)