

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

DOCUMENT # 706144

02 NOV -8 AM 10:15

1. Corporation Name

NATIVITY LUTHERAN CHURCH OF PALM BEACH GARDENS
INC.

SECRETARY OF STATE
FILED 11/20/02--01004--008 **236.25

Principal Place of Business

OF PALM BEACH GARDENS FLORIDA
4075 HOLLY DRIVE
PALM BEACH GARDENS FL 33410

Mailing Address

OF PALM BEACH GARDENS FLORIDA
4075 HOLLY DRIVE
PALM BEACH GARDENS FL 33410



REINSTATEMENT

02

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

4. Date Incorporated or Qualified
To Do Business in Florida

09/12/1963

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-1109086

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
SD D/P	HOECKER, ERIC F. S. HITCHCOCK	518 DRIFTWOOD RD 123 WINTER CLUB CT	NO PALM BEACH FL 33408 PALM BEACH GARDENS FL 33418
NO D/P	VERRASTRO, ROBERT HERB SCHALL	47 DUNBAR ROAD	PALM BEACH GARDENS FL 33418
TD	KEPLER, MARGARET	4335 CRESDALE ST	PALM BEACH GARDENS FL 33410
PD	HOECKER, ERIC PATRICIA K. HITCHCOCK	518 DRIFTWOOD RD 123 WINTER CLUB CT	NORTH PALM BEACH FL 33408 PALM BEACH GARDENS FL 33418
-SD	HOWENSTINE, TONI	1601 F SABAL RIDGE CIR	PALM BEACH GARDENS FL 33418
D	HOWENSTINE, TONI	1601 F SABAL RIDGE CIR	PALM BEACH GARDENS FL 33418

8. Name and Address of Current Registered Agent

HELGESEN, ANDREW
11380 PROSPERITY FARMS ROAD, SUITE 201
N. PALM BEACH FL 33408

9. Name and Address of New Registered Agent

Name F. STEVEN HITCHCOCK, ESQ.

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

123 WINTER CLUB CT

Suite, Apt. #, Etc.

City

PALM BEACH GARDENS

State

FL

Zip Code

33410

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

10/29/02

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PATRICIA K. HITCHCOCK, Secretary 10/29/02

Date

Daytime Phone

(561) 655-1199

CR2E040 (8/02)