

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**

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

FILED

01 NOV 20 PM 4:02

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT #

1706222

1. Corporation Name

FIRST BAPTIST CHURCH, INCORPORATED OF
MARGATE, FLORIDA

800004717098--2

-12/10/01--01092--031

***1706.25 ***1706.25

800004717098--2

-12/10/01--01092--032

*****61.25 *****61.25

2. Principal Office Address

749 Wentworth Street

3. Mailing Office Address

749 Wentworth Street

Suite, Apt. #, etc.**Suite, Apt. #, etc.****City & State**

Sebastian, Florida

City & State

Sebastian, Florida

Zip

32958

Country

U.S.A.

Zip

32958

Country

U.S.A.

**4. Date Incorporated or Qualified
To Do Business in Florida****5. FEI Number**

591140119

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

§ 615. A certificate of status is required
for a foreign corporation.

7. Name and Address of Current Registered Agent**Name**

Samuel Sutter, F.

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

749 Wentworth Street

Suite, Apt. #, Etc.**City**

Sebastian

State

FL

Zip Code

32958

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.**Signature of
Registered Agent**

Samuel Sutter

Date Nov 17, 2001

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Earl Turner	2112 Cypress Drive	Pompano Beach, Fl. 33068
T	Samuel Sutter, F.	749 Wentworth Street	Sebastian, Fl. 32958
S	Billie Jo Wilcox	2014 Graham Street	Daytona Beach, Fl. 32118

10. 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)(b), 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:

Samuel Sutter

Nov 17, 2001 561-388-3794

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2001 (9/00)