

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 JUN -4 AM 10:32

DOCUMENT # 707729

1. Corporation Name

MOUNT ZION BAPTIST CHURCH OF INDIANTOWN

**REINSTATEMENT**

94-08

500130725875  
06/04/08--01015--025 \*\*918.75  
CR2E081 (12/07)

2. Principal Office Address - No P.O. Box #

14789 SW MARTIN LUTHER KING, Jr.

3. Mailing Office Address

P.O. BOX 1918

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

INDIANTOWN, FL

City & State

INDIANTOWN, FL

Zip

34956

Country

USA

Zip

34956

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

8/21/1964

5. FEI Number  
65-0149716

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

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

Name

ROBERT E. WILLIS, Sr.

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

14789 SW MARTIN LUTHER KING DRIVE

Suite, Apt. #, Etc.

City

INDIANTOWN

State

FL

Zip Code

34956

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

*Robert E. Willis Sr.*

REGISTERED AGENT MUST SIGN

Date

*6/07/08*

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	ROBERT E. WILLIS, Sr.	P.O. Box 2057	Indiantown, FL 34956
S	DOROTHY COBBS	200 Alpatthaha Rd. #38	Indiantown, FL 34956
D	EDMOND J. WILLIAMS	4041 SW Hablon Street	Port St. Lucie, FL 34953
D	MERCY PERRY	P.O. Box 432	Indiantown, FL 34956
D	MILTON WILLIAMS	P.O. Box 752	Indiantown, FL 34956
	SEE ATTACHED FOR REMAINING	DIRECTORS	

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 contained in Chapter 119, 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:

*Robert E. Willis Sr. President*

Date

*6/02/08*

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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**CORPORATION REINSTATEMENT MEMBER CONTINUATION PAGE**

D	JAMES E. WOODY	14626 SW 169 <sup>TH</sup> Drive	Indiantown, FL 34956
D	LAWRENCE DOWLING	P.O. BOX 150	Indiantown, FL 34956