

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT FLORIDA DEPARTMENT OF STATE

**REINSTATEMENT** **122.80** **Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **712831**

1. Corporation Name

**NORTH BAY BAPTIST CHURCH, INC.**

Principal Place of Business

Mailing Address

**1202 VIRGINIA AVENUE  
LYNN HAVEN FL 32444**

**1202 VIRGINIA AVENUE  
LYNN HAVEN FL 32444**

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

**05/29/1967**

5. FEI Number

**71-2831130**

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PD	WALSINGHAM, WILLIE E.	3405 ORCHARD RD.	PANAMA CTY FL
VD	WISE, HAYES	1804 CAROLINA AVE	LYNN HAVEN FL
VD	HENRY, CORDELL	2002 DRAKE AVE	PANAMA CITY FL
T	SIMMONS, JAMES A	408 E 5TH ST	LYNN HAVEN FL

**800002905288-5**  
-06/15/99--01074--019  
\*\*\*\*122.50 \*\*\*\*122.50  
**800002905288-5**  
-06/15/99--01074--020  
\*\*\*\*\*8.75 \*\*\*\*\*8.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**WALSINGHAM, WILLIE E.  
3405 ORCHARD ROAD  
PANAMA CITY FL 32405**

Name

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

Suite, Apt. #, Etc.

City

State  
**FL**

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 Willie E. Walsingham  
REGISTERED AGENT MUST SIGN

Date 11-18-98

11. This corporation owes or has paid 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: Willie E. Walsingham  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**11-18-98** **850-814-9333**

CR2E040 (9/98)

6-8-99 JH

• To Whom it may concern:

We are late paying this due to some changes made at church and letter that was sent back to church was misplaced by another person and put in filed as completed and was not notice ~~until~~ until now. Sorry for the mix ed, we appreciate the fee being waived.

James Johnson,  
Treasurer