


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 JUL -5 AM 9:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA.

005-458457-1000062796
DEPT. OF STATE
07/17/07 01023-012
CR2E081 (1/07)

DOCUMENT # 713131

1. Corporation Name

Benevolent And Protective Order of Shepherds Inc.

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

2015 Holton St

Suite, Apt. #, etc.

3. Mailing Office Address

2015 Holton St.

Suite, Apt. #, etc.

City & State

Tallahassee, Fl.

City & State

Tallahassee, Fl.

Zip

32310

Country

U.S.A

Zip

32310

Country

U.S.A

4. Date Incorporated or Qualified To Do Business in Florida

July 28, 1967

5. FEI Number

54-3532405

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

Freddie C. Spivey

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

3427 Sunnyside Drive

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32305

☒ 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 **per 607.0505** **06262071**
07/17/07--01023--013 ***376.25

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

Freddie C. Spivey

REGISTERED AGENT MUST SIGN

Date 07/02/07

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
Grand Shepherd	Freddie C. Spivey	3427 Sunnyside Dr.	Tallahassee, Fl. 32305
Senior Shepherd	Laura Nickelson	2323 Vin Kara Dr.	Tallahassee, Fl. 32303
Secty	Edith Holiday-Austin	702 Brookridge Dr.	Tallahassee, Fl. 32305
Brd. member	Hattie Mae Adams	2408 Pontiac Dr.	Tallahassee, Fl. 32301
Brd. member	Jimmy R. Hall	351 Gawain Lane	Tallahassee, Fl. 32301
Brd. member	Sandra R. Allen	P.O. Box 788	Tallahassee, Fl. 32302

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:

Freddie C. Spivey

07/02/07

850-2281792

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #