PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
97 NOV -7 AM 9:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **715043**

1. Corporation Name

FIRST ASSEMBLY OF GOD, INC., OF THE CITY OF BOC A RATON, STATE OF FLORIDA

Principal Place of Business	Mailing Address
1300 NW 4TH AVE BOCA RATON FL 33432	1300 NW 4TH AVE BOCA RATON FL 33432

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT 97

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: 07/31/1968

5. FEI Number: 59-1891559 ☐ 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
PC	BOYKIN, MARK D.	~~9970 AEGEAN DR~~ 1308 NW 2nd Circle	BOCA RATON FL 33432
TTR	~~RAGLAND, CARL~~ Dean Amann	~~9610 SAWPINE RD~~ 4074 NW 62nd Lane	~~DELRAY BEACH FL~~ Coral Springs, FL 33067
STR	ENNIS, ALLEN	330 NW 5 AVENUE	BOCA RATON FL
TR	~~BURGESS, PAUL~~ Luis Castro	~~1985 NW 3RD AVE~~ 9320-C SW West Way	~~BOCA RATON FL~~ Boca Raton, FL 33428
TR	SENA, WESTMAN	2963 DOLPHIN DR	DELRAY BEACH FL
		$87 11/10	

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
CLOYD, LESLIE GERN ~~515 N. FLAGLER DR.~~ 1551 Forumplace Buildings 200 + 400 WEST PALM BEACH FL 33401	Name Street Address (P.O. Box Number Not Acceptable) 345142--B 11/12/97--01097--011 Suite, Apt. #, Etc. ****236.25 ****236.25 City / State FL / Zip Code

CR2E040 (8/97)

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 _____ (REGISTERED AGENT MUST SIGN) Date 11-2-97

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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #