

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 715354
 1. Entity Name
FAITH UNITED CHURCH OF CHRIST FT. LAUDERDALE, INC.



FILED
 08 NOV 12 AM 9:55

Principal Place of Business Mailing Address
 6201 NW 57 ST 6201 NW 57 ST
 TAMARAC, FL 33319 TAMARAC, FL 33319

DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

06-20-08 90001039461.25



REINSTATEMENT 08

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For
 59-6219323 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHITEMAN, KARL K REV.
 6201 NW 57TH ST.
 TAMARAC, FL 33319

Name
 Rev. Dr. Theana Roman
 Street Address (P.O. Box Number is Not Acceptable)
 6201 NW 57th St.
 City FL Zip Code
 Tamarac 33319

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE 11-10-08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

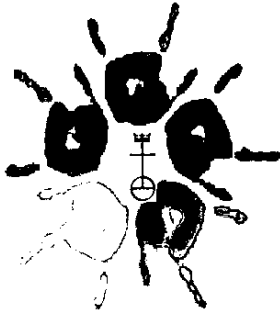
FILE NOW!!! FEE IS \$61.25 After January 1, 2009, Fee will be \$122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COSTELLO, PHIL 10590 NW 6 CT CORAL SPRINGS, FL 33071 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD POPE-URIBE, MICHELLE 1882 NW 93 TERR CORAL SPRINGS, FL 33071 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HAAS, DOLORES 4960 E SABAL PALM BLVD, # 103 TAMARAC, FL 33319 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T POWELL, ROY 9816 NW 54 PL CORAL SPRINGS, FL 33076 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATD HERRICK, MYRON 8371 N.W. 24TH PLACE SUNRISE, FL 33322 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FSD POWELL, DAPHNE 9816 NW 54 PL CORAL SPRINGS, FL 33076 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Roy Powell Roy Powell, Treasurer 11-10-08 (954) 731-1232
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



Faith United Church
"Many Cultures United in Christ"
6201 NW 57th Street
Tamarac, FL 33319-2305
954.721.1232 954.721.7164 (fax)
e-mail: uccfaith@bellsouth.net

November 10, 2008

Rev. Dr. Ileana Castillo-Roman
Senior Pastor and Teacher
Clinical Pastoral Counselor

Division of Corporations
P. O. Box 6327
Tallahassee, Fl. 32314

Re: Document # 715354 FAITH UNITED CHURCH OF CHRIST FT. LAUDERDALE,
INC.

TO WHOM IT MAY CONCERN:

We are in receipt of a Reinstatement Form for Not-For-Profit Corporation. In checking with your office as to the status of our application, it was learned that our original application had been returned to us, as it was incomplete.. The signature of the new registered agent was missing. Your agent also informed us at that time, that a letter of rejection had been mailed to us in June, along with the incomplete form. The fee for the filing however, was accepted and paid by our bank.

We are enclosing the requested reinstatement form and are also requesting that any reinstatement fees be waived as we did not receive the original letter of rejection.

Thanking you in advance for your assistance in this matter, I remain,

Very truly yours,

Roy Rowell
Treasurer

RP/cl
Enclosure