

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 SEP -1 AM 9:03

DOCUMENT # 717584

1. Corporation Name

SKYLAND BAPTIST CHURCH, INC.

Principal Place of Business

906 Savannah Avenue  
Lakeland, FL 33815

Mailing Address

P. O. Box 1764  
Lakeland, FL 33802

REINSTATEMENT 07-04

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida 11-19-69

5. FEI Number

59-2359596

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
P.	Barton/Weatherford	605 West Dees Road	Lakeland, FL 33809
S	Terry Leahy	1607 Seneca Avenue	Lakeland, FL 33801
D	Charlene Weatherford	605 West Dees Road	Lakeland, FL 33809

100040731011

09/01/04-01045-003 \*\*428.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Barton, P. Weatherford  
605 Dees Road West  
Lakeland, FL 33809

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

*Barton P. Weatherford*

Date 8-26-04

Barton P. Weatherford  
REGISTERED AGENT MUST SIGN

11. This corporation owes 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:

*Barton P. Weatherford*  
Barton P. Weatherford

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-26-04

Date

863/816-8295

Daytime Phone #

CFR2081 (12/98)