

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**FILED**

09 APR 14 PM 12:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # 721902**

1. Corporation Name

Cornerstone Church of the Nazarene Inc.

2. Principal Office Address - No P.O. Box #  
10310 Lem Turner Road

3. Mailing Office Address  
4029 Atlantic Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Jacksonville, FL

City & State  
Jacksonville, FL

Zip Country  
32218 USA

Zip Country  
32207 USA

900149765509  
04/14/09--01002--019 \*\*183.75  
**REINSTATEMENT** 07-09

4. Date Incorporated or Qualified To Do Business in Florida 10/19/1971

5. FEI Number 59-1648935 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  
Jenkins, Orville W. Jr.

Street Address (P.O. Box Number is Not Acceptable)  
6817 Southpoint Parkway

Suite, Apt. #, Etc.  
1301

City State Zip Code  
Jacksonville FL 32216

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 be waived.

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 \_\_\_\_\_ Date \_\_\_\_\_  
REGISTERED AGENT MUST SIGN

**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
P	Orville W. Jenkins Jr.	6817 Southpoint Parkway, #1301	Jacksonville, FL 32216
T	Mark R. Patrick	4029 Atlantic Blvd.	Jacksonville, FL 32207
DS	Martha Stephens	4404 Richmond Park Ct.	Jacksonville, FL 32224
D	Dhanarajan Raj	1693 Copperfield Cir.	Tallahassee, FL 32323
DS	Stan Wade	3512 Moody Road	Orange Park, FL 32065
D	Carol Parker	3530 N.W. 36th Place	Gainesville, FL 32605

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: Mark Patrick 4/1/2009 904-396-5400  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

4/14/09