

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

01 OCT 12 AM 11:18

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **731798**

1. Corporation Name

"S" AVENUE CHURCH OF CHRIST OF RIVIERA BEACH, INC.

2. Principal Office Address

2120 AVE. S

Suite, Apt. #, etc.

City & State

RIVIERA BEACH, FL

Zip

33404

Country

U.S.

3. Mailing Office Address

(SAME AS #2)

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

1989

5. FEI Number

591687746

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

91-01

7. Name and Address of Current Registered Agent

Name

JONATHAN B. YOUNG

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

500 CRESTWOOD CRT N.

Suite, Apt. #, Etc.

502

City

ROYAL PALM BEACH

State

FL

Zip Code

33411

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 **Jonathan B. Young**

Date **6/10/01**

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/T	JONATHAN B. YOUNG	500 CRESTWOOD CRT N. #502	ROYAL PALM BEACH, FL 33411
V/P/T	CLINTON SMITH	461 W. 32ND ST.	RIVIERA BEACH, FL 33404
S/T	JESSIE NAPIER	1620 W. 33 RD ST.	RIVIER BEACH, FL 33404
T/T	LARRY WEAVER	401 W. 33 RD ST.	RIVIERA BEACH, FL 33404
AT/T	ANDREW DEGRAFFENREIDT	508 CYPRESS DR.	LAKE PARK, FL 33403

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 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: **Jonathan B. Young** **JONATHAN B. YOUNG** **6/10/01** **561-308-9715**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #