

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 DEC 29 AM 10:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 732305

1. Corporation Name

THE FOUNDATION CHURCH OF JESUS, INC.

2. Principal Office Address

1308 N.W. 15TH PLACE

Suite, Apt. #, etc.

3. Mailing Office Address

1308 N.W. 15TH PLACE

Suite, Apt. #, etc.

City & State

FORT LAUDERDALE, FLORIDA

Zip

33311

Country

BROWARD

City & State

FORT LAUDERDALE, FLORIDA

Zip

33311

Country

BROWARD

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-0957244

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

WHITEHEAD, VERNON

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

680 N.W. 19th Street

Suite, Apt. #, Etc.

City

Pompano Beach

State

FL

Zip Code

33060

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

REGISTERED AGENT MUST SIGN

Date

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
D	WHITEHEAD, LEROY BISHOP	1308 NW 15th Place	Ft. Lauderdale, FL 33311
SD	WHITEHEAD, CAROLYN	1308 NW 15th Place	Ft. Lauderdale, FL 33311
D	WHITEHEAD, VERNON	680 NW 19th Street	Pompano Beach, FL 33060

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:

Leroy Whitehead, Bishop
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/27/04

Date

954.467-6831

Daytime Phone #

CR2E081 (01/04)