

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # 738002

1. Corporation Name

NEW LIFE ASSEMBLY OF GOD, INC., OF CLEARWATER, FLORIDA

Principal Place of Business

Mailing Address

5656 150TH AVENUE NORTH
CLEARWATER FL 33760

5656 150TH AVENUE NORTH
CLEARWATER FL 33760

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/04/1977

5. FEI Number

59-1874901

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 3 | City / State / Zip 4 |
|---------------|---|---|--|
| PD | GRIFFIN, RONALD | 7200 13TH AVE. N. | ST. PETERSBURG FL 33710 |
| TD | DEBORAH LYNN R <i>Wilson, Sharon</i> | 15777 BOLESTA RD. LOT 2 <i>5857 157 Ave N</i> | CLEARWATER FL 33760 <i>Clearwater FL 33760</i> |
| SD | LYNN, ERIC E | 15777 BELESTA RD LOT 2 | CLEARWATER FL 33760 |
| D | LAPIERE, WILLIAM | 7001 142TH AVE. N. | CLEARWATER FL 33771 |
| D | LEBELL, YVON | 512 7TH AVE N.E. | LARGO FL 33770 <i>ILS</i> |
| D | PARSONS, PAUL | 1873 BALBOA | CLEARWATER FL |

8. Name and Address of Current Registered Agent

GRIFFIN, RON
7200 13TH AVE., N.
ST. PETERSBURG FL 33710

9. Name and Address of New Registered Agent

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

Ron Griffin

Date

11-07-01

REGISTERED AGENT MUST SIGN

11. 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.

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SIGNATURE:

Yvon Lebell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11-7-01

Daytime Phone #