

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 742083

**1. Corporation Name**

EVERGREEN MISSIONARY BAPTIST CHURCH  
OF FORT LAUDERDALE INC.

**2. Principal Office Address**

2851 NW 13 ST

Suite, Apt. #, etc.

City & State

FT LAUDERDALE

Zip

33311

Country

**3. Mailing Office Address**

2851 NW 13 ST

Suite, Apt. #, etc.

City & State

FT LAUDERDALE

Zip

33311

Country

REINSTATEMENT

000710340 1 Roberts  
GR2E081 (8705)

**4. Date Incorporated or Qualified  
To Do Business in Florida**

3/23/78

**5. FEI Number**

65-0267473

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

JOYCE DUNLAP

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

2851 NW 13 ST

Suite, Apt. #, Etc.

City

FT LAUDERDALE

State

FL

Zip Code

33311

600062123066

12/13/05--01048--013 \*\*297.50

**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

Joyce Dunlap

Date 12/6/05

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
PD	WILLIAM RAMSEY	2851 NW 13 ST	Fort Lauderdale 33311
SD	JOYCE DUNLAP	2831 E SUNRISE LAKES DR	SUNRISE 33322
D	HENRY LEWIS	2851 NW 13 ST	Fort Lauderdale 33311
D	GREGORY MCLEAD	2851 NW 13 ST	Fort Lauderdale 33311
D	VERNAL THOMAS	2851 NW 13 ST	Fort Lauderdale 33311

**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:

Joyce Dunlap - JOYCE DUNLAP

12/6/05 954 587-4280

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #