

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JUN 30 AM 10:59
RECEIVED
FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 747192

1. Corporation Name

SAINT GILES CHURCH, EPISCOPAL, INC.

2. Principal Office Address

8271 52ND ST. N
Suite, Apt. #, etc.

City & State

PINELLAS PARK, FL

Zip

33781

Country

USA

3. Mailing Office Address

8271 52ND ST. N
Suite, Apt. #, etc.

City & State

PINELLAS PARK, FL

Zip

33781

Country

USA

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

05/15/1979

5. FEI Number

596181589

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

SANDRA WASSON

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

8381 56TH WAY NORTH

Suite, Apt. #, Etc.

City

PINELLAS PARK

State

FL

Zip Code

33781

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**

Sandra Wasson
REGISTERED AGENT MUST SIGN

Date 06/28/2005

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	The Rev. John L. Hartnett	12151 72 ND WAY	LARGO, FL 33773
D	WALTER COLLUM	3816 108 TH AVE N.	CLEARWATER, FL 33762
D	BRIAN TRIMBLE	2083 59 TH STREET N.	ST. PETERSBURG, FL 33710
D	LISE FIELDS	6609 10 TH ST. N.	ST. PETERSBURG, FL 33702
D.	SANDRA WASSON	8381 56 TH WAY NORTH	PINELLAS PARK, FL 33781
D.	Gene Lofgren	5220 90 TH TERRACE NORTH	PINELLAS PARK, FL 33782

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: The Rev. John L. Hartnett

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/28/05 (727) 544-6856

Date

Daytime Phone #

CR2E081 (01/05)

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