

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

16 Sept 16 PM 3:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **748538**
1. Corporation Name
Sunrise Missionary Baptist Church

2. Principal Office Address - No P.O. Box #
3087 N.W. 60th St

3. Mailing Office Address
Suite, Apt. #, etc.
City & State
Miami FL 33142

City & State
Miami FL 33142

Zip Country
33142

CR2E081 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number 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
Adline Grant

Street Address (P.O. Box Number is Not Acceptable)
8448 N.W. 14th Ave

Suite, Apt. #, Etc.

City State Zip Code
Miami FL 33147

500290313795
10/04/16--01013--014 **61.25

500290313795
09/16/16--01036--023 **236.25

297.50 Total

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 **Adline Grant** Date **9-13-2016**

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/D	Ann E. Johnson - President	1951 N.W. 79th Street Apt 102	Miami FL, 33147
V/P/D	Betty Dawkins - Vice President	1325 N.W. 59th street	Miami FL, 33142
S/D	Portia Williams - Secretary	855 N.W. 84th Street	Miami FL, 33150
T/D	Barbara Johnson - Treasurer	2600 N.W. 87th Terrace	Miami FL, 33147
D	Willie Johnson - Member	2600 N.W. 87th Terrace	Miami FL, 33147

REINSTATEMENT 2015-2016

S. HAWKES

10. E-mail Address: **Sunrisembc495@gmail.com** SEP 19 A.M.

(To be used for future annual report notification)

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, and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE: **Ann E Johnson President** **Ann E Johnson President** Date **9/13/2016** Daytime Phone # **305-546-7456**



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 19, 2016

SUNRISE MISSIONARY BAPTIST CHURCH, INC.
3087 NW 60TH ST
MIAMI, FL 33142

SUBJECT: SUNRISE MISSIONARY BAPTIST CHURCH, INC.
Ref. Number: 748538

We have received your document for SUNRISE MISSIONARY BAPTIST CHURCH, INC. and your check(s) totaling \$236.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above listed corporation was administratively dissolved or its certificate of authority was revoked for failure to file its 2015 corporate annual report form. To reinstate, the corporation must submit a completed reinstatement application or annual report and the appropriate fees.

The fees to reinstate the corporation are as follows: \$175 reinstatement fee, \$61.25 filing fee per year.

Therefore, the total amount due to reinstate the corporation is \$297.50. Add an additional \$8.75 for each certificate of status requested.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Suzanne Hawkes
Regulatory Specialist II

Letter Number: 916A00020013