

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 MAY 26 PM 4:03

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 753994

1. Corporation Name

First Church of the Nazarene of Tallahassee,
Florida, Inc.

2. Principal Office Address

1983 Mahan Dr.

Suite, Apt. #, etc.

3. Mailing Office Address

1983 Mahan Dr.

Suite, Apt. #, etc.

City & State

Tallahassee FL

City & State

Tallahassee FL

Zip

32305

Country

USA

Zip

32305

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

8/29/80

5. FEI Number

596543210

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

William Purcell, Esq.

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

1983 Mahan Drive

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32305

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

William R. Purcell

Date 5/26/04

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	Steven W. Gates	1983 Mahan Dr.	Tallahassee FL 32305
D	Richard Seidel	6885 Glenmeadow Ln.	Tallahassee FL 32311
D	Kenneth Nichols	3199 Whitney Dr. E.	Tallahassee FL 32301
D	Simmie Phillips	5106 Chumbord Pr.	Tallahassee FL 32308
			<i>W. R. Purcell</i>

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:

William R. Purcell

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/26/04

Date

894-8800

Daytime Phone #

CPRE081 (01/04)