

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

02 OCT 21 AM 9:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **756600**

1. Corporation Name

FREE CATHOLIC DIOCESE OF ST. PAUL THE APOSTLE, INC.

Principal Place of Business

Mailing Address

1470 LAURA STREET
CLEARWATER FL 33755
US

~~P.O. BOX 3454 N/A~~
~~CLEARWATER FL 33755~~
~~US~~



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

REINSTATEMENT 01-02

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

03/03/1981

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-2067261

Applied For

Not Applicable

City & State

City & State

CLEARWATER, FL

Zip

Country

Zip

Country

33767 US

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PD	MILNER, MACLIN R JR	1470 LAURA ST	CLEARWATER FL 33755
D	JOYAL, PATRICIA	3108 DUPONT ST S.	GULFPORT FL
VSTD	MILNER, MARIA E	1470 LAURA ST	CLEARWATER FL
D	MCBRIDE, IDA	906 ELDRIDGE ST	CLEARWATER FL 33755
D VSTD	MYERS, BARBARA	8325 BAY POINT DRIVE	TAMPA FL 33615

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***297.50 ***297.50

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~MILNER, MACLIN R JR~~
~~1470 LAURA ST~~
~~CLEARWATER FL 33755~~

Name

MILNER, MACLIN R JR

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

1470 LAURA ST

Suite, Apt. #, Etc.

City

CLEARWATER

State

FL

Zip Code

33755

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

Maclin R. Milner Jr.
REGISTERED AGENT MUST SIGN

Date OCT. 14, 2007

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)(l), 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: MACLIN R. MILNER, JR.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OCT. 14, 2007 (727)446-9319
Date Daytime Phone #

CR2E040 (8/01)