

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 JAN -5 AM 8:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 761792

**1. Corporation Name**

Crystal Lake Church of the Nazarene, Inc.

**2. Principal Office Address**

2119 N. Crystal Lake Dr.

Suite, Apt. #, etc.

**3. Mailing Office Address**

2119 N. Crystal Lake Dr.

Suite, Apt. #, etc.

**City & State**

Lakeland, FL

Zip 33813

Country USA  
PoK Co.

**City & State**

Lakeland, FL

Zip 33813

Country USA  
PoK Co.

**REINSTATEMENT** 02-84

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

2/9/1982

**5. FEI Number**

591869261

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

Betty Woods

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

423 W. Lazy Lake Drive

Suite, Apt. #, Etc.

City

Lakeland,

State  
FL

Zip Code

33801

**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

Ⓡ Betty J. Woods

Date 12/29/03

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	Rev. Randall RUPERT	599 Northridge Trail	Lakeland, FL 33813
S/T	Mary Lou Miller	125 Carlton St	Lakeland, FL 33803
D	Charles Hinthorne	7830 Delmont Loop	Lakeland, FL 33810
D	Roy Holloway	2331 View Way	Lakeland, FL 33810

**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:

RANDALL RUPERT  
Randall S. Rupert

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/29/03

Date

823  
709 1552

Daytime Phone #

CR2E081 (10/02)