

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **766983**

1. Corporation Name

VOICE OF DELIVERANCE, INCORPORATED

FILED

93 MAY 27 PM 2:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

C/O ILLIE MCINTOSH, JR.
9440 N.W. 30TH AVENUE
OCALA FL 32675-1806

Mailing Address

C/O ILLIE MCINTOSH, JR.
9440 N.W. 30TH AVENUE
OCALA FL 32675-1806

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

2. New Principal Office Address, If Applicable

2720 NW 95th Street

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.
7557 NE 184th Ave

City & State

OCALA FL

City & State

Williston FL

Zip

34475

Country

USA

Zip

32696

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

02/15/1983

5. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PD	MCINTOSH, JR. I	9440 N.W. 30TH AVENUE 2720 NW 95th Street	OCALA FL 34475
VD	WILLIAMS, RICKY T., SR.	RT. 1 BOX 5345 18950 NE 77th Place	WILLISTON FL
STD	WILLIAMS, ARLENE M.	RT. 1 BOX 5345 18950 NE 77th Place	WILLISTON FL
CM	PETERSON, CALLIE	RT. 1 BOX 306	MICANOPY FL

REINSTATEMENT

500002546985

-06/04/98--01001--016

******297.50 ****297.50**

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

MCINTOSH, ILLIE, JR.

9440 NORTHWEST 30TH AVENUE **2720 NW 95th Street**
OCALA FL 32675

Name

ILLIE MCINTOSH JR.

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

2720 NW 95th Street

Suite, Apt. #, Etc.

City

OCALA

State

FL

Zip Code

34475

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

Illie M. McIntosh Jr.

REGISTERED AGENT MUST SIGN

Date **4-27-98**

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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:

Illie M. McIntosh Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ILLIE MCINTOSH JR.

4-27-98

Date

352-351-9539

Daytime Phone #

CR20040 (8/97)