

Aug. 7. 2013, 2:43PM COMMUNITY PRESBYTERIAN CHURCH REINSTATEMENT No. 82240RP. 3

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 767071

1. Corporation Name

Community Presbyterian Church, Inc.

FILED

13 AUG -8 PM 12:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E081 (11/10)

2. Principal Office Address - No P.O. Box # 830 Pinewood Drive, SW		3. Mailing Office Address Post Office Box 206	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Live Oak, FL		City & State Live Oak, FL	
Zip 32064	Country Suwannee	Zip 32064	Country Suwannee

4. Date incorporated or Qualified
To Do Business in Florida
February 18, 1983

5. FEI Number 58-1511388	Applied For Not Applicable
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6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Randy L. Wilding
Street Address (P.O. Box Number is Not Acceptable)
830 Pinewood Drive, SW
Suite, Apt. #, Etc.

City Live Oak	State FL	Zip Code 32064
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600250264306
07/30/13--01017--012 **358.75

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

Randy L. Wilding
REGISTERED AGENT MUST SIGN

Date July 15, 2013

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
DPC	Randy L. Wilding	1332 Coliseum Ave.	Live Oak, FL 32064
DV	Mark Rodgers	11297 89th Road	Live Oak, FL 32060
DS	Herman Gunter IV	9946 CR 136	Live Oak, FL 32060
DT	Matthew Rodgers	11239 89th Road	Live Oak, FL 32060
D	Klaas Reyneveld	9502 180th Street	McAlpin, FL 32062
			S. HAWKES

10. E-mail Address: george.tilton.cpc@gmail.com

(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 upon 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., 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.617.155, F.S.

SIGNATURE:

Randy L. Wilding
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 15, 386-362-2323

Date

Daytime Phone #

EXAMINER