

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 DEC 27 PM 2:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # ~~050050303~~ 767477

1. Corporation Name
ST. JAMES AFRICAN METHODIST EPISCOPAL CHURCH
OF FT. LAUDERDALE, FLORIDA, INC.

2. Principal Office Address 2713 NW 12th Court Suite, Apt. #, etc.		3. Mailing Office Address 2315 NW 155 Street Suite, Apt. #, etc.	
City & State Ft. Lauderdale, FL		City & State Opa Locka, FL	
Zip 33311	Country U.S.A.	Zip 33054	Country U.S.A.

REINSTATEMENT 2002

4. Date Incorporated or Qualified To Do Business in Florida		03/15/1983
5. FEI Number 050050303	Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Rev. Ronnie Britton

Street Address (P.O. Box Number is Not Acceptable)
2315 NW 155th Street

Suite, Apt. #, Etc.

City
Opa Locka,

State
FL

Zip Code
33054

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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 *Rev. Ronnie Britton* Date 12/19/02

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/T	Rev. Ronnie Britton	2315 NW 155th Street	Opa Locka, FL 33054
T	Walter Garner	2960 NW 8th Road	Ft. Lauderdale, FL 33311
T	Joe Major	3410 NW 5th Court	Ft. Lauderdale, FL 33311
T	Deloris Dixon	734 Southwest 4th Street	Dania, FL 33044
D	Sadie Walker	515 BW 17th Avenue	Ft. Lauderdale, FL 33311
D	Gerald Spicer	1236 NW 18th Court	Ft. Lauderdale, FL 33311

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: *Rev. Ronnie Britton* Rev. Ronnie Britton Date 12/19/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E081 (9/01)