

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 MAR 25 AM 10:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 769977

1. Corporation Name

Braden River Baptist Church, Inc. of Manatee County

5412 State Road 64 East

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2. Principal Office Address

5412 State Road 64 East

3. Mailing Office Address

5412 State Road 64 East

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Bradenton, FL

City & State

Bradenton, FL

Zip

34208

Country

USA

Zip

34208

Country

USA

4. Date Incorporated or Qualified

To Do Business in Florida 08/24/1983

5. FEI Number

59-1298592

☒ 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

Wayne Young, Senior Pastor

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

10623 Old Grove Circle

Suite, Apt. #, Etc.

City

Bradenton

State

FL

Zip Code

34212

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

Wayne Young

Date

1-31-05

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
T	Leon Langford	504 45th Street East	Bradenton, FL 34208
D	Jim Smith	1605 24th Avenue West	Palmetto, FL 34221
D	Gloria Manzenberger	13514 3rd Avenue Northeast	Bradenton, FL 34212

800049885668

04/05/05-01098-004 **420.00

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:

Gloria Manzenberger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/31/04

Daytime Phone #

941-747-2868

CR2E081 (01/04)