

F23000001119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

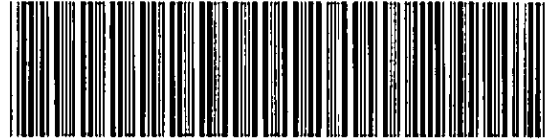
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W230000617071

Office Use Only



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01/23/23--01030--015 **70.00

APPROVED
AND
FILED

2023 FEB 23 PM 1:24

FEB 23 2023
K. Brumley



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 8, 2023

GERALD GAENSLEN
4877 CENTER POINT RD.
FREDERICKSBURG, TX 78624

SUBJECT: KOLBE PRISON MINISTRIES CORPORATION
Ref. Number: W23000017071

We have received your document for KOLBE PRISON MINISTRIES CORPORATION and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must include the purpose(s) for which the corporation is authorized in the home state or country to be carried out in the state of Florida. Please make such correction to number 8 of the application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6053.

Yvette Scott
Supervisor

Letter Number: 823A00003043

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Kolbe Prison Ministries

Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Gerald Gaenslen

Name of Person

Kolbe Prison Ministries

Firm/Company

4877 Center Point Rd

Address

Fredericksburg, TX 78624

City/State and Zip Code

stkolbepisonministries@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gerald Gaenslen

Name of Person

at (210)
Area Code

500-4235

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &
Certificate of Status

☐ \$78.75 Filing Fee &
Certified Copy

☐ \$87.50 Filing Fee.
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO
CONDUCT ITS AFFAIRS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN
THE STATE OF FLORIDA:*

1. Kolbe Prison Ministries Corporation

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

Kolbe Prison Ministry Corporation

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Texas 3. 475446694

(State or country under the law of which it is incorporated) (FEL number, if applicable)

4. October 29, 2015

5. _____
(Date of duration, if other than perpetual)

(Date of Incorporation)

6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)

7. 4877 Center Point Rd, Fredericksburg, TX 78624

(Principal office street address)

(Current mailing address, if different)

8. Non-profit ministering inside prisons & jails with bible study, scriptural classes, and retreats to the incarcerated

(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Andrew Cash

Office Address: 5242 Pale Moon Dr.

Pensacola

(City)

Florida 32507

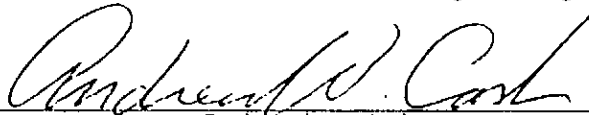
(Zip Code)

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10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☐ Chairman Name: Gerald Gaenslen
☐ Vice Chairman Address: 22126 Gypsy Hawk
☒ Director San Antonio, TX 78261
☒ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Jimmy Reno
☐ Vice Chairman Address: PO Box 290528
☒ Director Kerrville, TX 78029
☐ President _____
☒ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

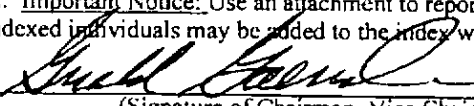
☐ Chairman Name: Kathleen McDonald Tong
☐ Vice Chairman Address: 212 Park Ridge
☒ Director Boerne, TX 78006
☐ President _____
☐ Vice President _____
☒ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: John Panariello
☐ Vice Chairman Address: 136 Riverwalk
☒ Director Bastrop, TX 78602
☐ President _____
☐ Vice President _____
☐ Secretary ☒ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Larry Reeh
☐ Vice Chairman Address: 44 LDS Lane
☒ Director Fredericksburg, TX 78264
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: Daniel Reyes
☐ Vice Chairman Address: 4865 W. Shoals Creek
☒ Director Lake Charles, LA 70605
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. 
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Gerald Gaenslen, President Kolbe Prison Ministries
(Typed or printed name and capacity of person signing application)



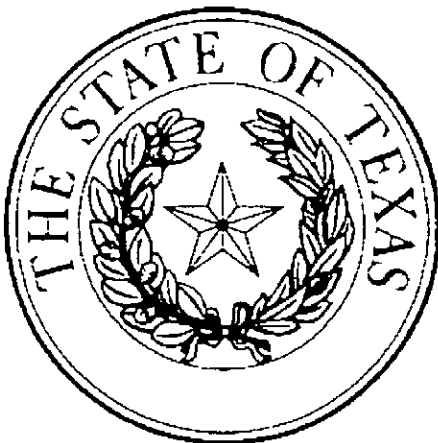
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Kolbe Prison Ministries (file number 802325418), a Domestic Nonprofit Corporation, was filed in this office on October 27, 2015.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 16, 2023.



A handwritten signature in black ink that reads "Jane Nelson".

Jane Nelson
Secretary of State