

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 JUL 12 PM 12:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000000045

1. Corporation Name

THE TRADITIONAL ROMAN CATHOLIC ARCHDIOCESE IN AMERICA, INC.

Principal Place of Business

Mailing Address

7005 11TH AVE WEST
BRADENTON FL 34209-4065

7005 11TH AVE WEST
BRADENTON FL 34209-4065



REINSTATEMENT 01-02

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12/21/1992	
City & State		City & State		5. FEI Number	
Zip		Zip		11-3075745	
Country		Country		Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
DP	SAVAGE, ANTHONY F REV MOS	7005 11TH AVE. WEST	BRADENTON FL 34209 <i>RM</i>
DPT	METZGER, ANTON R REV.	7005 11TH AVENUE WEST	BRADENTON FL 34209
DS	CARR, JAMES R REV.	7005 11TH AVE W	BRADENTON FL 34209
DS	JACKSON, Charles Rev.	4485 17th St. West	BRADENTON FL 34207
			400006444154--2
			-07/16/02--01034--018
			****306.25 ****306.25

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
METZGER, ANTON R REV. 7005 11TH AVE. WEST BRADENTON FL 34209-4065	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State FL Zip Code

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 Anton R Metzger Date 7/10/02
REGISTERED AGENT MUST SIGN

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 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.

Rev. Anton R. Metzger
SIGNATURE: Rev. Anton R. Metzger 7/10/02 (941) 795-8148
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (8/01)