

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 DEC -4 PM 1:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N00000001427

1. Corporation Name

New-Vision Baptist Chrch
807-67th Avenue Drive West
Bradenton, FL 34207

2. Principal Office Address

807-67th Ave Dr W.

Suite, Apt. #, etc.

City & State

Bradenton, Florida

Zip

34207

Country

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT

01-03

900025228799
12/04/03--01018--024 **192.50

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

Applied For

XX

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

Orilange Bien-Aime

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

807-67th Avenue Drive West

Suite, Apt. #, Etc.

City

Bradenton

State

FL

Zip Code

34207

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

REGISTERED AGENT MUST SIGN

Date

11/21/03

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	Orilange Bien-Aime	807-67th Ave Dr W	Bradenton, FL 34207
T	Abner Joseph	2024-84th Cir NW	Bradenton, FL 34209
S	Ironce Ferdinand	604-60th Ave E	Bradenton, FL 34203

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/21/03 941-752-4570

Date

Daytime Phone #

CR2E081 (10/02)

LAYON F. ROBINSON, II, P. A.

ATTORNEY AND COUNSELOR AT LAW

442 OLD MAIN STREET

BRADENTON, FLORIDA 34205

LAYON F. ROBINSON, II

GINGER M. WEISKOPF

CERTIFIED LEGAL ASSISTANT

TELEPHONE

(941) 748-0055

FACSIMILE

(941) 748-1410

November 22, 2003

Secretary of State
P.O. Box 6327
Tallahassee, FL 32314

RE: New-Vision Baptist Church, Inc.
Reinstatement

Dear Sir:

Please be advised I have enclosed the amount of \$183.75, to reinstatement the above named corporation to New-Vision Baptist Church, Inc. The corporation was suspended in 2001 for failure to pay fees, however, we are requesting of waiver of \$175.00 because we did not get the first or the second notice in 2001. I have also enclosed, the form that is required, however, if you note I written they are not for profit as in deed this is a non profit organization as it is a Baptist Church.

If there is any additional matter please feel free to let me know.

Sincerely yours,



LAYON F. ROBINSON, ESQ.

LFR/jgh

cc; Client
File