

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

10 OCT 26 AM 8:39

**DOCUMENT #** N00000003689

1. Corporation Name

Bethel Youth Development, Inc  
511A Woodland Dr  
PENSACOLA, FL 32503

2. Principal Office Address - No P.O. Box #

511A WOODLAND DR

Suite, Apt. #, etc.

3. Mailing Office Address

511A WOODLAND DR

Suite, Apt. #, etc.

City & State

PENSACOLA FL.

City & State

PENSACOLA FL.

Zip

32503

Country

ESCAMBIA

Zip

32502

Country

ESCAMBIA

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

742962339

☐ 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

REV. CHARLES A. MORRIS

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

511 WOODLAND DRIVE

Suite, Apt. #, Etc.

City

PENSACOLA FL

State

FL

Zip Code

32502

W10000045798

**REINSTATEMENT**

**RH**

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

*Ch Morris*

REGISTERED AGENT MUST SIGN

Date 9/18/2010

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
MRS	NICHOLS, JOYCE C DR.	1209 Rule Street	PNS FL 32505
MRS	SIMMONS, THERESA	2191 Teate Avenue	PNS FL 32504
MRS	BUSKEY, DEBARA	1833 SAN DOLLAR Circle	PNS FL 32504
REV	Morris, Charles A	521 Woodland Dr	PNS FL 32503
O	Brown, Ronald	4500 Francisco Rd	PNS FL 32504
O	Judith Hollishead	5860 Somerset Dr	PNS FL 32526

10. E-mail Address: ADMIN@BETHELCPENSACOLA.COM

(To be used for future annual report notification)

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, I further certify, 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:

*Ch Morris*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/18/2010

Date

Daytime Phone #

Attachment N00000003689

**BETHEL AFRICAN METHODIST EPISCOPAL CHURCH**

Reverend Charles A. Morris, MDiv. - Pastor

511 Woodland Drive  
Phone: 850-434-3881

Pensacola, Florida 32503  
FAX: 850-434-7505



September 24, 2010

Florida Department of State  
Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

RE: Reinstatement Document N00000003689

Dear Representative:

Enclosed is the executed reinstatement document and payment (\$236.25) for Bethel Youth Development, Inc. In addition, please modify the corporation officers at noted below:

Ronald Brown  
- Debora Y. Buskey  
Judith E. Hollinhead  
Henry L. McAway  
- Rev. Charles L. Morris  
- Joyce L. Nichols  
- Theresa Simmons

Should you have any questions, please contact me at (850) 434-3881.

Sincerely,

A handwritten signature in black ink, appearing to read "Judith E. Hollinhead".

Judith E. Hollinhead  
Chief Operations Officer

Enclosure

**RH**