## **APPLICATION** \_ FØR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

## N00000008461 DOCUMENT #

1. Corporation Name

## BUFORD GROVE BAPTIST CHURCH, INC.

Principal Place of Business

Mailing Address

BEH BOKE HILLIARD FL 32046

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

Country

FILED

04 JUN 23 AM II: 03

SECRETARY OF STATE TALLAHASSEE, FLORIDA



900037361639 05/27/04--01015--001 \*\*61.25 03 M

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number

59-1868969

Applied For Not Applicable

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

12/14/2000

7. Names	and Street Addresses of Each Officer and/or Director (I	Florida nonprofit corporations must list at least 3 directors)	
Title(s)	Name of Officers and/or Directors	Street Address of the Officer and/or Director	State / Zip
PD	MERRITT, HAL S	<del>27186 H</del> arley Dr <i>2-715</i> 6	HILLIARD FL 32046
1VPD	THOMPSON, EDWARD	1670 CIR DR 45214 CIR OR.	CALLAHAN FL 32011
\$	L'ANDRETH, TERRY	210 NORTH WOODVALLEY DR	KINGSLAND GA 31548
TD	DAVIS, KERRY L	PO BOX 82 56952 DAVIS Rd.	CALLAHAN FL 32011
ΤĎ	MERRITT, HAL S	PT 3 BOX 5670 2715 6 HARLEY OR	HILLIARD FL 32046
2 <i>V</i> P0	WOMACK, ROLAND	27687 CONNER NELSONK	HILLIARD FL 32046

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

O. Box Number is Not Acceptable)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section

Signature of Registered Agent

MERRITT, HAL S

-ROUTE 4-BOX-7115-HILLIARD FL 32046

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/2004 (904) 845-28

rofi

5/13/2004

## TO WHOM IT MAY CONCERN

A STATE OF THE STA

I WISH TO ADVISE THAT THE TWO PREVIOUS UBR NOTICES WERE

NOT RECIEVED. WE REQUEST THAT YOU REINSTATE THE BUFORD

GROVE BAPTIST CHURCH CORP. ENCLOSED IS \$61.25 ANNUAL

REPORT FEE WITH OUT REINSTATEMENT FEE AS PER INSTRUCTIONS.

AS PEN YOUR REQUEST ENCLOSED IS ANOTHER CHECK

FOR \$61.25 TOTALING \$1,22.50,

RESPECTFULLY YOURS

Hal S. MERRITT

AGENT: BUFORD GROVE BAPTIST CHURCH INC.