

APPLICATION  
FOR  
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Katharine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**NOO 317**

DOCUMENT #

1 Corporation Name

Jim and Faye Andrews Outreach Ministries, Inc.

FILED

99 MAR 31 PM 3:52

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

Sarasota, Florida

Mailing Address

3859 Bee Ridge Road, #104  
Sarasota, Florida 34233

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

2. New Principal Office Address, If Applicable

3859 Bee Ridge Road

Suite, Apt. #, etc.

Suite 101

City & State

Sarasota, Florida

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

34233

Country

USA

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

12/13/83

5. FEI Number

59-2439166

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	Jim H. Andrews	200 Naplo LaMolina Del Sol	Lima, Peru South America
D	Alice Faye Andrews	200 Naplo LaMolina Del Sol	Lima, Peru South America
D	Martin R. Andrews	2203 Cheshire Drive	Birmingham, AL 35235
REINSTATEMENT 94-99 LET 4-7-99			
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8. Name and Address of Current Registered Agent

John Meier  
3859 Bee Ridge Road, #104  
Sarasota, Florida 34233

9. Name and Address of New Registered Agent

Name

Ronald M. Cherp

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

3859 Bee Ridge Road

Suite, Apt. #, Etc.

Suite 101

City

Sarasota

State

FL

Zip Code

34233

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

*[Signature]*  
REGISTERED AGENT MUST SIGN

Date 03/30/99

11. This corporation owes the current year  
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information  
on intangible tax.)

12. 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:

X:

*[Signature]*

03/30/99

205.853.7381

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Martin R. Andrews, Director/Secretary/Treasurer

Date

Daytime Phone #