

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 DEC -5 PM 8:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01000000123

1. Corporation Name

Door of Refuge Church Assemblies of God
Inc. Pt. Charlotte Fl.

2. Principal Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Office Address

P.O.Box 494858

Suite, Apt. #, etc.

City & State

Pt. Charlotte Fl.

Zip

Country

33952

Charlotte

CR2E081 (8/05)

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

11/25/2002

5. FEI Number
65-1095163

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. Peter L. Garcia, Pastor

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

5412 Belrose Street

Suite, Apt. #, Etc.

City

Lehigh Acres

State

FL

Zip Code

33971

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

12/2/05

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
Pres	Rev. Peter L. Garcia	5412 Belrose Street	Lehigh Acres Fl. 33971
Sec.	Brunilda Feliciano	5143 Richmond Ave	Ft. Myers Fl. 33905
Tres	Amalia A. Zamot	181 Dowling Ave N.E.	Pt. Charlotte Fl. 33952

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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: Rev. Peter L. Garcia, Pastor, Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/02/05 239-229-8948

Date

Daytime Phone #

W. Williams DEC - 5 2005



IGLESIA PUERTA DE REFUGIO
28038 CLEVELAND AVE.
PUNTA GORDA FL. 33982
941-639-2775



Rev. Peter L. Garcia
Pastor
Home 239-332-2466
Cell: 239-565-6974

Hna. Brunilda Feliciano
Secretaria
Home: 239-694-1527

Hna. Amy Zamot
Tesoreroa
941-286-6769

December 2, 2005

To whom it may concern,

We did not receive the renewal form in 2003 for our incorporation.
We are respectfully requesting that the penalty fees be waived.

Thankyou,

Rev. Peter L. Garcia, Pastor, President of the Corporation