

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 MAR -2 AM 9:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01000003385

1. Corporation Name

Faith Deliverance Outreach Temple, Inc.

2. Principal Office Address

410 South Martin Luther King Blvd

Suite, Apt. #, etc.

3. Mailing Office Address

7200 WAGON Trail Road

Suite, Apt. #, etc.

City & State

Macklenny, Florida

Zip

Country

32063 U.S.

City & State

Tallahassee FL

Zip

Country

32310 U.S.

100067882921

03/15/06--01009--014 **206 25

4. Date Incorporated or Qualified
To Do Business in Florida

5-15-2001

5. FEI Number

59-3739744

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

Charlie C. Small

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

410 South Martin Luther King Blvd.

Suite, Apt. #, Etc.

City

Macklenny

State

FL

Zip Code

32063

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

Charlie C. Small

Date 1-31-2006

REGISTERED AGENT MUST SIGN

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
Pastor	Charlie C. Small	410 Martin Luther King Blvd	Macklenny, FL 32063
President	Eloise Small	410 Martin Luther King Blvd	Macklenny, FL 32063
V.P.	Charles A. Small	7200 Wagon Trail Rd	Tallahassee, FL 32310
Secretary	Melissa R. Thomas	1117 N.E. 16 th Ave.	Gainesville, FL 32609

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:

Bishop C C Small

CHARIE C 2006-30-1

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2ED01 (01/04)