

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CONTONATION PROPERTY	DA DEPARTMENT OF STATE Secretary of State	FILED
2009-2016	DIVISION OF CORPORATIONS	16 FEB 16 AM \$: 05
	22255	•
DOCUMENT # NOZOCO	2064	SECRETARY OF STATE TALLAHASSEE, FLORIDA
1. Corporation Name Campbell's Temple		ALLANASSEL, FLUKIDA
Holiness Church, Inc.		•
1414 Wisconsin Avenue		
Lynn Haven, Florida 32444		
2. Principal Office Address - No P.O. Box # 3. Mailing Office Address		
1414 WISCORSIN AVE	SAME	
	pt. #, etc.	CR2E081 (11/10)
		4. Date Incorporated or Qualified To Do Business in Florida
City & State	<u> </u>	5 FEI Number 31, 2016 - Dec 31, 2016
Lynn Haven, Fla F	Country	Not Applicable
	HH4	CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current R	legistered Agent	
Name	1 1 4 40	
Edward AChestmut Mee		
Suite ADI # Etc.	Correction &	L
Suite, Apt. # Etc.	2/12/2014	800281708038
Lynn Haven	FL 32444	800281708038 02/02/1601016017 **825.00
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the applications of section 607.0505 or 617.0503. F.S.		
Signature of Registered Agent A Chatan Gal Trade Jan 17, 2016		
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)		
Name of	Street Address of Each	
Officers and/or Directors	Officer and/or Director	City / State / Zip
15 Lead Dencon / Securiary	Lynn Haven, Fla 324	
MIT I Michael Cricon	922 BRADLEY CIRCLE LYNN HAVEN FL 32444	Lynn Haven, Fla 32444
TVA Johnnie Hill Jr.	1311 IND. AVE.	1.32444 Lynn Haven, Fla 32444
7 - Rodney Ericlin	206 E. 1944 ST LYNN HAVEN FL 324	1 - 2
T Edward A CHESTNUT Jr	1416 MINNESOTA Ave	1 11 Ha 100 Fla 324411
Edward A Cheet Tr	hynn Haven, FIA 3244	-
10. E-mail Address: (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., and 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 over the corporation of the corpora		
If made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817 155, F.S. SIGNATURE: Edward A Chest nut SR Cliffic to SL		