

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 NOV -9 PM 2:57

DOCUMENT # *N02000001051*

1. Corporation Name

*CHILDREN OF GOD PENTECOSTAL
Church, Inc*

2. Principal Office Address

2914 Chipco St

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33605

Country

USA

3. Mailing Office Address

3211 E. Wilder Ave

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33610

Country

USA

REINSTATEMENT

02-03

4. Date Incorporated or Qualified
To Do Business in Florida

2/08/02

5. FEI Number

☒ 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. Frankie L. Williams

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

3211 E. Wilder Ave

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33610

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

Rev. Frankie Williams

REGISTERED AGENT MUST SIGN

Date *10/27/04*

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
<i>Pres.</i>	<i>FRANKIE L. WILLIAMS</i>	<i>3211 E. Wilder Ave</i>	<i>Tampa, FL 33610</i>
<i>SEC</i>	<i>GWEN CURRY</i>	<i>1903 McBerry St</i>	<i>Tampa, FL 33610</i>
<i>Treas</i>	<i>FRANKIE L. WILLIAMS</i>	<i>3211 E. Wilder Ave</i>	<i>Tampa, FL 33610</i>

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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. Frankie Williams / *FRANKIE L. WILLIAMS*

Date

10/27/04 (813) 238-3548

Daytime Phone #

CR2E081 (01/04)