

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JAN 27 AM 9:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N02000003877

1. Corporation Name

RIGHTEOUS IN CHRIST WORSHIP CHAPEL INC

Principal Place of Business

Mailing Address

~~2530-22-ST~~
~~ST PETERSBURG FL 33712~~

~~2530-22-ST~~
~~ST PETERSBURG FL 33712~~

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

2. New Principal Office Address, If Applicable

4410 9TH STREET SOUTH
Suite, Apt. #, etc.
ST. PETERSBURG, FLORIDA
City & State

3. New Mailing Office Address, If Applicable

4410 9TH STREET SOUTH
Suite, Apt. #, etc.
ST. PETERSBURG, FLORIDA
City & State

Zip 33705 Country PINELLAS

Zip 33705 Country PINELLAS

4. Date Incorporated or Qualified
To Do Business in Florida

05/20/2002

5. FEI Number

04-3676389

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 3	City / State / Zip 4
P	KING, GODFREY A REV	2530 22 ST	ST PETERSBURG FL 33712
VS	KING, YOLANDA W	2530 22 ST	ST PETERSBURG FL 33712
T	PIERCE, WILLIE W	2530 22 ST	ST PETERSBURG FL 33712

REINSTATEMENT

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KING, GODFREY A REV
2530 22 ST
ST PETERSBURG FL 33712

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

Godfrey A. King

REGISTERED AGENT MUST SIGN

Date 1/12/04

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., 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:

Godfrey A. King

GODFREY A. KING

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/04

Date

(727) 820-0905

Daytime Phone #

CR2E040 (7/03)