

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 DEC 10 AM 10:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 1102759

1. Corporation Name
Liberty Church of Tallahassee
2450 FL. GA. Hwy RT 4 Box 515
HAVANA, FL 32333 HAVANA FL 32333

Principal Place of Business Mailing Address

2450 FL. GA. Hwy.
HAVANA, FL. 32333

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

2. New Principal Office Address, If Applicable
2450 FL. GA. Hwy.
Suite, Apt. #, etc.
City & State
HAVANA FL
Zip
32333 Country
CADSDEN

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip Country

4. Date Incorporated or Qualified
To Do Business in Florida

4-26-84

5. FEI Number

59-2261783

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PD	EMILE T. BRADY JR	2494 FL. GA. Hwy	HAVANA, FL. 32333
VD	KATHLEEN A BRADY	2494 FL. GA. Hwy	HAVANA, FL. 32333
STD	Ken Lambert	1960 CARD LANE	TALLAHASSEE, FL. 32303

REINSTATEMENT

97-98

12/11/98

8. Name and Address of Current Registered Agent

EMILE T. BRADY JR
2494 FL. GA Hwy
HAVANA, FL 32333

9. Name and Address of New Registered Agent

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.

Signature of
Registered Agent

E. T. Brady Jr

REGISTERED AGENT MUST SIGN

Date 12/7/98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☐

No ☒

(See other side for information
on intangible tax.)

12. 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:

E. T. Brady Jr

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/7/98

Date

Daytime Phone #

CR20040 (1/98)