

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N04000003996**

1. Corporation Name

Restoration Village Ministries, Inc.

2. Principal Office Address

1751 Kings Hwy.
Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 507
Suite, Apt. #, etc.

City & State

Clearwater, Fl.

City & State

Clearwater, Fl.

Zip

33755

Country

Pinellas

Zip

33755

Country

Pinellas

**4. Date Incorporated or Qualified
To Do Business in Florida**

4/22/2004

5. FEI Number

34-1991675

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

Nathanie L Ramsey

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

336 Tavernier Drive

Suite, Apt. #, Etc.

City

Oldsmar

State

FL

Zip Code

34677

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**

Nathanie L Ramsey
REGISTERED AGENT MUST SIGN

Date **11-25-06**

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
Pres.	Nathanie L Ramsey	336 Tavernier Drive	Oldsmar, Fl. 34677
Dir.	Joyce Ramsey	336 Tavernier Drive	Oldsmar, Fl. 34677
Dir.	Naomi B. Williams	1300 Ridge Ave.	Clearwater, Fl. 33755
Dir.	Hiram Green	9608 Cypress Brook Rd	Tampa, Fl. 33647
	Handwritten signature		

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 contained in Chapter 119, 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.

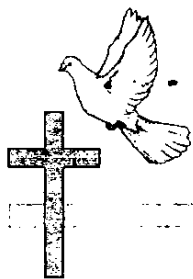
SIGNATURE:

Nathanie L Ramsey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nathanie L Ramsey

Date

11-25-06 (813) 925-0690
Daytime Phone #



Restoration Village Ministries

MINISTRIES & PROGRAMS

Nov. 24, 2006

Dear Sirs,

This letter comes as an official request asking you to waive the reinstatement fee because we didn't receive the annual report notice. We apologize for any inconvenience this may have caused your office.

Feed The Homeless

Restoration
Food Pantry

Man of God
A Men's Issues Program

The Godly Woman
A Women's Issues
Program

Youth Program

Pre-Marital
& Marriage Counseling

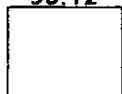
Street Services

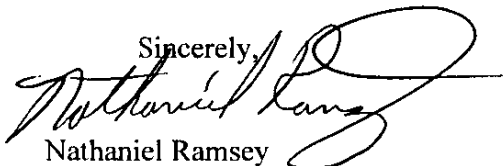
Intercessory Prayer Team

Spiritual Restoration
T.V. & Radio Program

Gospel Music Concert
Series of Fundraisers

Isaiah
58:12



Sincerely,

Nathaniel Ramsey
Pastor

1751 Kings Hwy.
Clearwater, Fl. 33755
Tele: 727-446-8800