

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 AUG 13 PM 2:11

STATE
ALLIANCE, FLORIDA

DOCUMENT # *N0400000 8612*

1. Corporation Name

Calvary Chapel of South Tampa, Inc.

2. Principal Office Address - No P.O. Box #

4401 W. Cypress St.

Suite, Apt. #, etc.

3. Mailing Office Address

4511 S. Lois Ave

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

TAMPA, FL.

Zip

33607

Country

Hillsborough

Zip

33611

Country

Hillsborough

REINSTATEMENT *05-07*
CR2E081 (1/07)

4. Date Incorporated or Qualified
To Do Business in Florida

Sept 01, 04

5. FEI Number

20-1801400

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

Gerald Negrotto Jr.

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

4511 S. Lois Ave.

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33611

☐ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

Gerald Negrotto Jr.

REGISTERED AGENT MUST SIGN

Date *8/8/07*

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.	<i>Gerald Negrotto Jr.</i>	<i>4511 S. Lois Ave,</i>	<i>Tampa, FL 33611</i>
V.P.	<i>John Chinelly Jr.</i>	<i>2802 N. 46th Ave</i>	<i>Hollywood, FL 33021</i>
T	<i>William Lamorey</i>	<i>26 Spring Lane</i>	<i>W. Hartford, Ct 06107</i>

8/8/14
500107969075
08/13/07--01045--012 **236.25

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:

Gerald Negrotto Jr.

Gerald Negrotto Jr.

8/8/07

813-786

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7135

Re: reinstatement of our Corporation status

To Whom It May Concern:

Until today, we were unaware of a yearly filing cost that sustains our status as a corporation. I do not want to dissolve this corporation.

We moved and never received forwarded documents concerning a yearly filing, therefore we were just not aware. I am not sure of the dissolved date, nor am I sure of the correct fee. We have enclosed a check for \$236.25 in any case, if it is more, we want to know.

Our new mailing address in on the enclosed form.

Thank you so much,


Gerald Negrotto Jr.

President

Calvary Chapel of South Tampa, Inc