

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N05134

1. Corporation Name

FAITH UNITED CHRISTIAN CHURCH, INC.

2. Principal Office Address

2411 N. ARMENIA AVENUE

Suite, Apt. #, etc.

City & State

TAMPA, FLORIDA

Zip

33607

Country

HILLSBOROUGH

3. Mailing Office Address

17123 DOWNS DRIVE

Suite, Apt. #, etc.

City & State

ODESSA, FLORIDA

Zip

33556

Country

HILLSBOROUGH

REINSTATEMENT

7-00

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

SEPTEMBER 13, 1984

5. FEI Number

59-2547214

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒ **3875** Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

RAY DONALD JOHNSON

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

17123 DOWNS DRIVE

Suite, Apt. #, Etc.

City

ODESSA

State

FL

Zip Code

33556

500003164725-3

03/10/00-01012-003

******428.75 ****428.75**

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

Ray Donald Johnson
REGISTERED AGENT MUST SIGN

Date **02/21/2000**

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
P	JOHNSON, RAY D.	17123 DOWNS DRIVE	ODESSA, FLORIDA 33556
TD	GIVENS, GARY, SR.	4307 S. LAUREL STREET	TAMPA, FLORIDA 33607
TD	MARTIN, SHIRLEY M.	845 SCENIC HEIGHTS DRIVE	BRANDON, FLORIDA 33511
TD	BALLOON, NELLIE M.	4110 W. CYPRESS STREET	TAMPA, FLORIDA 33607

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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:

Ray D. Johnson
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RAY D. JOHNSON

02/21/2000 (813) 920-6000

Date

Daytime Phone #

CR2E081 (9/99)