

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N01060009749

1. Corporation Name

RiverTown Church, Incorporated

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

8895 Canopy Oaks Drive

Suite, Apt. #, etc.

City & State

Jacksonville, FL

Zip

32256

Country

Duval

3. Mailing Office Address

8895 Canopy Oaks Drive

Suite, Apt. #, etc.

City & State

Jacksonville, FL

Zip

32256

Country

Duval

FILED

10 MAR -9 PM 4:16

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

08-60

REINSTATEMENT
CR2E081 (11/09)

4. Date Incorporated or Qualified
To Do Business in Florida

OCTOBER 3, 2007

5. FEI Number

20-8966079

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

Daniel Adams

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

8895 Canopy Oaks Drive

Suite, Apt. #, Etc.

City

Jacksonville

State

FL

Zip Code

32256

☒ 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

REGISTERED AGENT MUST SIGN

Date March 5, 2010

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	Daniel Adams	8895 Canopy Oaks Drive	Jacksonville, FL 32256
V	Murray Karneol	813 McKenzie Drive	St. Augustine, FL 32092
S	Wayne Adams	4713 Mariners Point Drive	Jacksonville, FL 32225
T	Mark Whalen	9090 Hampton Landing Drive	Jacksonville, FL 32256
	M. MILLIGAN EXAMINER	MAR - 9 2010	100171598551 03/09/10--01004--012 **103.75

10. E-mail Address: info@rivertown.com

(To be used for future annual report notification)

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. I further certify, 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:

Daniel Adams

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/2010

Date

904-626-1865

Daytime Phone #