

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N09000010938

1. Corporation Name

The New Jerusalem Church of God in Christ

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

635 SW 10th Ave.

Suite, Apt. #, etc.

City & State

Homestead, FL

Zip

33030

Country

US

3. Mailing Office Address

10521 SW 166 St.

Suite, Apt. #, etc.

City & State

Miami, FL

Zip

33157-3065

Country

US

7. Name and Address of Current Registered Agent

Name

Dr. Kenneth J. Day Sr.

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

10521 SW 166 St.

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33157-3065

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 **June 8, 2012**

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
STR	Mertha D. Day	10521 SW 166 St.	Miami, FL. 33157
TRCFO	Carlton Walker	2383 SE 12th St	Homestead, FL. 33035-2154
TR	Sadie Walker	2383 SE 12th St	Homestead, FL. 33035-2154

10. E-mail Address: **Kennethday33@yahoo.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., and 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. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE:

Dr. Kenneth J. Day Sr.

June 8, 2012

786-316-6167

FILED
2012 JUN 14 AM 10:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700236385657
06/14/12--01014--002 **236.25

CR2E081 (11/10)

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

5. FEI Number

☐ Applied For
☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status