

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

page 10/2

APPLICANT
FOR
REINSTATEMENT



SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1997 MAY 13 PM 2:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N09218**

1. Corporation Name
**HOLY GHOST OUTREACH PRAYER
MINISTRIES INCORPORATED**

Principal Place of Business Mailing Address
**1 N.W. 1ST STREET P.O. BOX 23759
GAINESVILLE FL 32601 Gainesville FL
32602**

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
1 N.W. 1ST ST

Suite, Apt. #, etc.
GAINESVILLE FL.

City & State
GAINESVILLE FL.

Zip
32602

Country
U.S.

3. New Mailing Office Address, If Applicable
P.O. BOX 23759

Suite, Apt. #, etc.
GAINESVILLE FL.

City & State
GAINESVILLE FL.

Zip
32602

Country
U.S.

4. Date Incorporated or Qualified
To Do Business in Florida
05/09/1985

5. FEI Number
59-2524483

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	
PD	Williams Ruben S.	1 N.W. 1ST ST	GAINESVILLE, FL. 32601
D	* Eula L. Williams	2038 NE 55TH BLVD	GAINESVILLE FL 32611
D	WILLIAMS L. JACKSON	1 N.W. 1ST ST	GAINESVILLE FL. 32601

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**Ruben S. Williams
1 N.W. 1ST STREET
GAINESVILLE FL. 32601**

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Ruben S. Williams

REGISTERED AGENT MUST SIGN

Date **4/28/97**

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

(See other side for information
on intangible tax.)

12. 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)(l), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ruben S. Williams

4/28/97

Date

Daytime Phone #

352-376-1577

CR2040 (12/96)

WE LOVE YOU & GOD LOVE YOU

pg 2 of 2

Holy Ghost Out Reach
Prayer Ministries, Inc.
P.O. Box 1234
Gainesville, FL 32602
904/378-8252 Prayer Hotline



Evangelist Ruben S. Williams
Secretary & Treasurer
Eula L. Williams

Exodus 15:26
I Am The Lord That
Healeth Thee.

APRIL 28TH, 1997

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL. 32314

TO WHOM IT MAY CONCERN

IN 1995 MY ADDRESS CHANGED AND I PLACED MY NEW PHYSICAL MAILING ADDRESS BLOCK 10 LINES 83:84.

AS I WAS GOING THROUGH THE RETURNS, I DISCOVERED THAT I HAD NOT RECEIVED A RETURN FOR 1996 OR 1997.

WE THANK YOU IN ADVANCE FOR WAIVING THE FEE, AND REINSTATING THE CORPORATION. (ATTACHED IS CHECK #1005 IN THE AMOUNT OF \$122.50.) \$61.25 FOR 1996 AND \$61.25 FOR 1997.

SINCERELY YOURS

REV. RUBEN S. WILLIAMS
PRESIDENT.