

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

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

FILED
Sep 11, 2001 8:00 A.M.
Secretary of State

DOCUMENT # N12591

1. Corporation Name

PRINCE CHAPEL A.M.E. CHURCH, INC.

800004597028--4
-09/18/01--01045--030



REINSTATEMENT

00-01

Principal Place of Business

Mailing Address

612 S. 11TH STREET
FERNANDINA BEACH FL 32034

612 S. 11TH STREET
FERNANDINA BEACH FL 32034

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

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

12/18/1985

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

59-6278031

Applied For

Not Applicable

City & State

City & State

Fernandina Bch, FL

Zip

Country

Zip

Country

32034

Nassau

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P	THOMAS, MOSE REV	12259 FRANKLIN BROOK LANE	JACKSONVILLE FL 32255
D	PRINCE, ALBERT	402 CEDAR STREET	FERNANDINA BEACH FL 32034
T	GRANT, MARION G	42 L.S. MORRISON DR.	FERNANDINA BEACH FL 32034
D	ALBERT, CHARLES L JR	612 S. 11TH STREET	FERNANDINA BEACH FL 32034
SD	ALBERT, ERNIE T	612 S. 11TH STREET	FERNANDINA BEACH FL 32034
			LS

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

ALBERT, CHARLES L JR
612 S. 11TH STREET
FERNANDINA BEACH FL 32034

Name
CHARLES L ALBERT, JR
Address (if applicable)
612 South 11th St.
Suite, Apt. #, Etc.

City

Fernandina Beach

State

FL

Zip Code

32034

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

CHARLES L ALBERT, JR
REGISTERED AGENT MUST SIGN

Date 3/29/01

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 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:

CHARLES L ALBERT, JR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/01
Date

904-261-4113
Daytime Phone #

Please reinstate. Enclosed is a check for the