

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

07 MAY 23 PM 4:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # N22072**

**1. Corporation Name**

St. Matthew Baptist Child Development Center, Inc.

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

3716 E. Lake Ave

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33610

Country

US

**3. Mailing Office Address**

3716 E. Lake Ave

Suite, Apt. #, etc.

City & State

Tampa, FL

Zip

33610

Country

US

800103043868  
05/23/07--01002--005 \*\*236.25

**REINSTATEMENT**

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

8/17/1987

**5. FEI Number**

592854655

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

David Walker

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

3006 33rd Ave

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33610

☒ 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

*David W. Walker*

Date

5-7-07

REGISTERED AGENT MUST SIGN

**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
Mr.	Rowe Taylor	3608 E. McBerry	Tampa, FL 33610
Ms.	Constance Marshall	3621 E. North Street	Tampa, FL 33610
Mr.	Clifford Harris	3206 E. Gidden Avenue	Tampa, FL 33610
Mr.	David Shedrick	4910 84th Street	Tampa, FL 33619
Mr.	David Walker Sr	3006 33rd Ave	Tampa, FL 33610
Mr.	Antonio Hines	12062 Stone Crossing Cir	Tampa, FL 33626

**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 contained in Chapter 119, 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:**

*David Walker*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #