PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
98 AUG 31 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****245.00 ****245.00

DOCUMENT # N35494

1. Corporation Name
River City Baptist Church Incorporated

Principal Place of Business: 1627 Wofford Ave. Jacksonville, FL 32218

Mailing Address

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

2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip Country

3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.
Zip Country

B. 9/4
REINSTATEMENT 98

4. Date Incorporated or Qualified To Do Business in Florida: 12/04/89

5. FEI Number: 59-1836633 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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PD	Betty Jean Stalnecker	1627 Wofford Ave.	Jacksonville, FL 32218
VD	Rhonda Kay Paradise	1627 Wofford Ave.	Jacksonville, FL 32218
STD	Patricia A. Steed	11467 Avery Dr.	Jacksonville, FL 32218
D	Sharon O'Hara	1627 Wofford Ave	Jacksonville, FL 32218
D	Ed Hanvey	8847 Ricardo	Jacksonville, FL 32216
D	Bill Carter	6127 Tuscony	Jacksonville, FL 32217

8. Name and Address of Current Registered Agent
Ed Hanvey
8847 Ricardo
Jacksonville, FL 32216

9. Name and Address of New Registered Agent
Name: Betty Jean Stalnecker
Street Address (P.O. Box Number is Not Acceptable): 1627 Wofford Ave.
Suite, Apt. #, Etc.
City: Jacksonville State: FL Zip Code: 32218

CR2E040 (1/98)

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: Betty Jean Stalnecker
REGISTERED AGENT MUST SIGN
Date 08/27/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. 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)(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: Betty Jean Stalnecker 08/27/98 904-757-2433
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Betty Jean Stalnecker