

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 FEB -7 PM 3:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N37467

1. Corporation Name
New Mt Pleasant Baptist Church, Incorporated

2. Principal Office Address
5518 NW 23 ave
Suite, Apt. #, etc.

3. Mailing Office Address
1045 NW 117 St
Suite, Apt. #, etc.

City & State
Miami, FL
Zip
33142
Country
USA

City & State
Miami, FL
Zip
33168-6232
Country
USA

REINSTATEMENT 03-05

4. Date Incorporated or Qualified To Do Business in Florida 03-29-1990

5. FEI Number 65-0191909 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
W. R. Roundtree Jr.
Street Address (P.O. Box Number is Not Acceptable)
14421 NW 13 Rd
Suite, Apt. #, Etc.
City
Miami

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State
FL
Zip Code
33167

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 W. R. Roundtree Jr.
REGISTERED AGENT MUST SIGN

Date 2/2/2005

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
S	Jennetta M. Davis	1520 NW 56 St	Miami, FL 33142
D	Celestine Allen	815D NW 13 Ct	Miami, FL 33147
T/D	John H. Richburg	1045 NW 117 St	Miami, FL 33168
P	W. R. Roundtree Jr	14421 NW 13 Rd	Miami, FL 33167
D	Woodrow Minor	13865 NW 26 Ave	Miami, FL 33254
D	Dorothy J. Logan	766 NW 74 St	Miami, FL 33157

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 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: Jennetta M. Davis Jennetta M Davis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 02-02-05 Daytime Phone # 305-694-1782

CR2E081 (01/05)