PLEASE REA	ALL INS	TRUCTIONS	BEFORE C	OMPLET	ING THIS FORM.
APPLICATION FOR 92-97 REINSTATEMENT FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State (DIVISION OF CORNORATIONS				AFF	AND ALED
DOCUMENT # N37820					31 PH 2: 34
THE FREE CATHOLIC CHURCH, INC.				SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business Mailing Address					
6280 NW 26 STREET SUNRISE, FLORINA 33313-2203					
If above addresses are incorrect in any way, line New Principal Office Address, If Applicable	formation and enter correction below. ng Address, If Applicable		DO NOT WRITE IN THIS SPACE 4. Date Incorporated or Qualified Table Proposation Provided		
N/A Suite, Apt. #, etc.	N/A Suite, Apt. *, etc.			To Do Business in Florida APRIL 25, 1990	
City & State	City & State	City & State		5. FEI Number	65-0193 726 V Applied For Not Applicable
Zip Country	Zip	Country	y .	6. CERTIFICATE	E OF STATUS DESIRED S8.75 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) Name of Officers Street Address of Each					
Title(s) and/or Directors		Officer and/or Director 3 (Do NOT Use Post Office Box f			City / State / Zip
PD JOHN J. SAI) JOHN J. SPICER		GASO NW 26 STREET		SUNRISE, FL 33313-2208
VD TERRY G. VILLAIRE 3459 PIERCE			ERCE S	TREET	HOLLYWOOD, FL 33021
SD ROBERT R. ROBIDA 3373 H			1 po Lux o	ROAD	LANTANA, FL 33462
/2			1324 12th FAIRWAY WELLING TON, FL 33414		
MD ANDREW ZAHE	1D ANDREW ZAHEREK 2742 N.E. 14			TREETTY	FT. LAUS ER DALE, FL 33304
8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent 9. Name and New Re					
Name				AI /a	G. Glass of New registered Agent
BISHOP JOHN J. SPICER Street Address (P.					and the same of the same of A A A A A A A A A A A A A A A A A A
6280 N.W. 26 STREET SUNRISE, FL. 33313-2203 Suite. Apt. #, Etc.					_0450C501 01010 011
City				O	*****481.25 *****481.25 0000021[9 i(45 i0 - 5
Signature of Registered Agent Bushap John John Date Tebruary 4, 1997					
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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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 filling 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., and that all tees owed by the corporation have been paid. 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: Brokes John J. Spin BISHOP JOHN J. SPICER FEBRUARY 4 1997 954 761-5784 SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR Date Date Description Phone #					