


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 MAR 24 AM 10:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N41669**

1. Corporation Name
OPEN BIBLE CHURCH, INC.

Principal Place of Business 1200 30TH AVE. NORTH ST. PETERSBURG FL 33704	Mailing Address 1200 30TH AVE. NORTH ST. PETERSBURG FL 33704
--	--



REINSTATEMENT B-24

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.	3. New Mailing Office Address, if Applicable Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida 01/15/1991	
5. FEI Number 59-0791036	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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
CD	GARLIER, GOERGET CASTRO, Alfred	1614 1ST STREET NORTH 2805 Clover Dew CT	ST. PETERSBURG FL 33709 Valrico, FL 33594
PD D	HARPER, DELBERT Sonn, Roy G.	616 NEWBORN AVE N 8162 Terrace Gardens DR	ST. PETERSBURG FL 33709 33709-3370 St. Petersburg, Fla.
VD D	FAUNCE, DAVID Rodriguez Wanetta	881 73RD AVE N #1 2411 - 49th North	ST. PETERSBURG FL 33709 St. Petersburg Fl 33710
SD D	CANNON, EMORY Peters, Wilma	1300 51ST AVE N 7018 - 65th way N.	SAINT PETERSBURG FL 33709 33782 Pineellas Park, E
TD	FREELAND, RICHARD	4140 COUNTY RD #16	ST. PETERSBURG FL 33709

8. Name and Address of Current Registered Agent

~~GARLIER, GEORGE I.~~
~~1614 1ST STREET NORTH~~
~~SUITE 1~~
~~ST. PETERSBURG FL 33704~~

9. Name and Address of New Registered Agent

Name **Alfred O. Castro**
Street Address (P. O. Box Number is Not Acceptable) **2805 Clover Dew CT**
Suite, Apt. #, Etc.
City **Valrico** State **FL** Zip Code **33594**

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. or 617.0505, F.S.

Signature of Registered Agent Alfred O. Castro REGISTERED AGENT MUST SIGN

Date **3/18/04**

900031057249
03/24/04--01019--011 **297.50

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided 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: Roy G. Sonn
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **3-18-04** Daytime Phone # **929-547-0575**

CR2E040 7/03