

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED
AND
FILED

1997 OCT 15 PM 12:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

N42971

1. Corporation Name

Apostolic Pentecostal Church of Wauchula, Inc

WA97-23071

Principal Place of Business

Mailing Address

118 W. Carlton Street
Wauchula, FL 33873

P. O. Box 2033
Wauchula, FL 33873-2033

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

4/11/91

5. FEI Number

65-0260155

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
SD	Kathryn Maynard	1136 Downing Circle	Wauchula, FL 33873
D	Sally Shoptaw	1144 Downing Circle	Wauchula, FL 33873
D	Georgia Rigney	114 N. Polk Ave.	Arcadia, FL 34266
PD	J. Matthew Ford	1132 Downing Circle	Wauchula, FL 33873

REINSTATEMENT

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

George W. Maynard (Deceased)
1136 Downing Circle
Wauchula, FL 33873

Name

J. Matthew Ford

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

1132 Downing Circle

Suite, Apt. #, Etc.

-10/17/97-01095-005

City

Wauchula

State

FL

Zip Code

33873

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

J. Matthew Ford

REGISTERED AGENT MUST SIGN

Date

9/10/97

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 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:

J. Matthew Ford

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
J. Matthew Ford, President/Director

9/30/97

Date

Daytime Phone #

941-767-1759

CFR2040 (12/95)