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
99 APR -2 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N43192**

1. Corporation Name

FIRST LADIES PRAYER BRUNCH OF TAMPA, INC.

Principal Place of Business	Mailing Address
4620 SAN JOSE ST TAMPA FL 33629 US	~~3408 VALENCIA RD~~ ~~TAMPA FL 33629~~ US

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

REINSTATEMENT 98-C19

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc. P.O. Box 273284
City & State	City & State Tampa, FL
Zip / Country	Zip 33688-3284 / Country

4. Date Incorporated or Qualified To Do Business in Florida: 04/26/1991

5. FEI Number: 59-3143767 ☐ 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
CD	COLMENARES PAT	4620 SAN JOSE ST	TAMPA FL
DT	TOOTHMAN, DEANNA	~~3408 VALENCIA RD~~ 12401 Orange Grove #1113	TAMPA FL
D	MCINNIS, ELEANOR	3408 LYKES AVE	TAMPA FL

8. Name and Address of Current Registered Agent

COLMENARES, PAT
4620 SAN JOSE ST
TAMPA FL 33629

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City | State: FL | Zip Code

CR2E040 (9/98)

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: Patricia E. Colmenares Date: 1-15-99

REGISTERED AGENT MUST SIGN

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: Deanna K. Toothman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-25-99 (813) 962-4658
Date / Daytime Phone #

0063771 AF