

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FORM 4-01
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # *N44243*

1. Corporation Name
KNOW OF JUDAH CHURCH INTERNATIONAL, INC.

FILED

99 MAR -1 AM 10: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
*7501 ULMERTON RD #2615 SAME
HARGO, FL 33771*

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
PINELLAS

REINSTATEMENT

*94-99
708
3/1/99*

4. Date Incorporated or Qualified To Do Business in Florida *7/5/91*
5. FEI Number *59-3080263*
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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
<i>C/P/D</i>	<i>REV. M. JOYCE FROHLICH</i>	<i>7501 ULMERTON RD #2615</i>	<i>HARGO, FL 33771</i>
<i>V/S/D</i>	<i>REV. MARTIN L. FROHLICH, JR.</i>	<i>3108 THOMAS RD</i>	<i>CLEARWATER, FL</i>
<i>D</i>	<i>PAULINE DAVIS</i>	<i>3445 STATE RD. 580</i>	<i>SAFETY HARBOR, FL</i>

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8. Name and Address of Current Registered Agent

*REV. M. JOYCE FROHLICH
7501 ULMERTON RD #2615
HARGO, FL 33771*

9. Name and Address of New Registered Agent

Name *SAME*
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City State Zip Code
FL

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 *Rev. M. Joyce Frohlich*
REGISTERED AGENT MUST SIGN

Date *Feb. 24, 1999*

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☐ No ☐ **EXEMPT**

(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)(j), 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: *Rev. M. Joyce Frohlich* *REV. M. JOYCE FROHLICH* *2/24/99* *727 532-6182*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #