

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 NOV -5 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N46254

1. Corporation Name
ST. MARK MISSIONARY BAPTIST CHURCH INC
OF NEW BERLIN

2. Principal Office Address <u>10193 NEW BERRY RD E.</u>		3. Mailing Office Address <u>(SAME AS 2)</u>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <u>JACKSONVILLE, FL</u>		City & State	
Zip <u>32226</u>	Country <u>U.S.</u>	Zip	Country

REINSTATEMENT

4. Date Incorporated or Qualified To Do Business in Florida 11-27-91

5. FEI Number 59-3083769 Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$375 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
CHRISTOPHER E. RUSSELL, Sr.

Street Address (P.O. Box Number is Not Acceptable)
4035 BRYANT GLEN AVE

Suite, Apt. #, Etc.

City
JACKSONVILLE

State
FL

Zip Code
32208

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent [Signature] Date 11-2-04

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
<u>P10 Pres.</u>	<u>CHRISTOPHER E. RUSSELL, Sr.</u>	<u>4035 BRYANT GLEN AVE</u>	<u>JACKSONVILLE, FL 32208</u>
<u>T10 Treas.</u>	<u>PAULA L. TRUSSELL</u>	<u>4035 BRYANT GLEN AVE</u>	<u>JACKSONVILLE, FL 32208</u>
<u>S10 Secretary</u>	<u>ERICA GAHAM</u>	<u>3325 INTERNATIONAL VILLAGE CT.</u>	<u>JACKSONVILLE, FL 32277</u>

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11/15/04--01074--016 **490.00

10. 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: [Signature] CHRISTOPHER E. TRUSSELL, Sr. President Date 11-2-04 Daytime Phone # 904-764-7880

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (10/02)