

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

APPROVED
AND
FILED

03 OCT 29 PM 5:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N48802**

1. Corporation Name

GENESIS CHURCH OF RELIGIOUS SCIENCE, INC.

Principal Place of Business

4405 N. HWY AIA
VERO BEACH FL 32963
US

Mailing Address

P. O. BOX 650862
VERO BEACH FL 32965
US



REINSTATEMENT 2003

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.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/08/1992

5. FEI Number

65-0400077

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
T	HUBBARD, LOUISE TREASURER	2367 SE HABRINGTON AVE	PORT SAINT LUCIE FL 34952
DM	MAURER, DONNA REV	240 W DEL MUNDO ST 101 KILDARE DR.	FORT PIERCE FL 34946 SEBASTIAN FL 32958
MB	MARSH, LEA SECRETARY	388 ROUSE RD	FORT PIERCE FL 34946
D	GROFF, DORIS DELETED (RESIGNED FOR HEALTH REASONS)	1961 C060 PLUM LANE	VERO BEACH FL 32963
CP	TUMLIN, TRACY N PRESIDENT	536 GREY TWIG RD	VERO BEACH FL 32963
OX	MCNULTY, ORDETTE VICE PRESIDENT	1140 SW 40TH AVE	VERO BEACH FL 32968

8. Name and Address of Current Registered Agent

MAURER, DONNA
240 W DEL MUNDO ST
FORT PIERCE FL 34946

ADDRESS CHANGE
ONLY

9. Name and Address of New Registered Agent

Name **DONNA MAURER**
Street Address (P.O. Box Number is Not Acceptable)
101 KILDARE DR.
Suite, Apt. #, Etc.
SEBASTIAN FL
City
SEBASTIAN

State
FL

Zip Code
32958

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

Donna Maurer

REGISTERED AGENT MUST SIGN

000024333990
10/31/03-01056-013-11236.25
Date **10/28/03**

11. 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:

Donna Maurer LOUISE HUBBARD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/28/03
Date

772-567-7790
Daytime Phone #

CR2E040 (7/03)