 •	DI EASE DEAD	All INOTI	DUCTIONS	DEEODE C	COMPLET	INIC THIS FORM	
PLEASE READ ALL INSTRUCTIONS E APPLICATION FOR CONTROL REINSTATEMENT PLEASE READ ALL INSTRUCTIONS E FLORIDA DEPARTMENT Sandra B. Morth Secretary of Sta				NT OF STATE tham State			
DOCUMENT # N48887 1. Corporation Name				99 APR - 7 Fil 1: 58			
GRANT CHAPEL UNITED METHODIST CHURCH, INC.						Standard TE	
Principal Place of Business Mail			ailing Address				
301-WEST ENGLAND AVENUE WINTER PARK FL 32789		301 WEST ENGLAND AVENUE WINTER PARK FL 32789					
		agh incorrect information and enter 3. New Maling Office Address. If Suite, Apt. #, etc. City & State			4 Date Incorporated or Qualified To Do Business in Florida 05/11/1992 5 FE1 Number Applied For Not APPLICABLE Not Applied For		ile
Zip	Country	Zη	Country	^	l	\$8.75 Additional Fee required for a Certificate of Statu	red S
Title(s) 1	1 2 3			da nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director (Da NOT Use Post Office Box Numbers)		City / State / Zip	
P	BEASLEY, JOHN W. JR.		301 W. NEW ENGLAND AVE.			WINTER PARK FL	
V D	VD STRAUGHTER, BENJAMIN		301 W. NEW ENGLAND AVE			WINTER PARK FL	
SD BROOKS, LORETHA			301 W. NEW ENGLAND AVE			WINTER PARK FL	
TD	PAIGE, ANNIE	301 W. NEW ENGLAND AVE			WINTER PARK FL		
REINSTATEMENT 98 9 Name and Address of Current Registered Agent]
REASIEY MOUNT WIDEN ID				Name gr			
301 W NEW ENGLAND AVENUE WINTER PARK FL 32789			Street Address (P.C Suite, Apt. #, Etc.		O Box Number is Not Acceptable)		
***************************************				City		State Zip Code	
•	appointed the registered agent of the abov		~)	L th and accept the ob	rigations of Section	on 607.0505, F.S	
Signature of Registered i		GISTERED AGE	NT MUST SIGN			Oate 2/6/29	
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.)							
this reins owed by	statement application, the reason for dissolute corporation have been paid and the napplication is true and accurate, and my sign	ution has been el ames of individua nature shall have	rminated, the corpor ils listed on this for the same legal effe	rate name satisfies t n do not qualify for a	the requirements an exemption und oath	pter 607 or 617, F.S. I further certify that when filing of section 607 0401 or 617,0401, F.S., that all fees fer section 119,07(3)(i), F.S. The information indicate	a
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 10-16 (1997) SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 10-16 (1997)							