

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. Pg 1522

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JAN 28 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N50434**

1. Corporation Name

AGAPE Temple Church

2. Principal Office Address

4019 N. 8th Ave

Suite, Apt. #, etc.

City & State

Pensacola, Fla

Zip

32503

Country

ESCAMBIA

3. Mailing Office Address

3810 W. Fairfield DR

Suite, Apt. #, etc.

City & State

Pensacola, Fla

Zip

32505

Country

ESCAMBIA

REINSTATEMENT 03-05

4. Date Incorporated or Qualified
To Do Business in Florida

Aug 19, 1992

5. FEI Number

59-313-6309

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

ROSA Abney

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

4019 N. 8th Ave

Suite, Apt. #, Etc.

City

Pensacola

State

FL

Zip Code

32503

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

Rosa Abney

REGISTERED AGENT MUST SIGN

Date **1-26-05**

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
PASTOR	ROSA Abney	4019 N. 8th Ave	Pensacola, Fla 32503
ASST PASTOR	ELIJAH HICKS	266 Springdale Circle	Pensacola, Fla 32503
DEACON	ERNEST McNeil	1200 Rio Grande Circle	Pensacola, Fla 32505

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: **Rosa Abney**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1-26-05

Daytime Phone #

CR2E081 (01/04)

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1-26-05

To Whom it May Concern:

We didn't receive the reject letter from the State. The check was received for 2003 and it was ~~Cashed~~ and applied to the Church Acct. Thank you in advance.
