

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
01 NOV -5 PM 12:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** N50933

1. Corporation Name

Church of the Living God Pillar and Ground of  
the Truth of Pinellas County, Inc.

2. Principal Office Address

1500 18th Avenue South

Suite, Apt. #, etc.

City & State

St. Petersburg, Florida

Zip  
33705

Country  
Pinellas

3. Mailing Office Address

2330 Caalexico Way South

Suite, Apt. #, etc.

City & State

St. Petersburg, Florida

Zip  
33712

Country  
Pinellas

**REINSTATEMENT**

00-01

4. Date Incorporated or Qualified  
To Do Business in Florida

2/10/68

5. FEI Number

59-3722571

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

Missionary Joyce Williams Thomas

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

2330 Caalexico Way South

Suite, Apt. #, Etc.

City

St. Petersburg

State

FL

Zip Code

33712

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

*Joyce Williams Thomas*  
REGISTERED AGENT MUST SIGN

Date

Aug. 31, 2001

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
DP/T	Missionary Joyce Thomas	2330 Caalexico Way South	St. Petersburg, FL 33712
DVP	Elder John Knight	1807 52nd Street South	Gulfport, FL 33707
D/S	Sister Sander R. Myles	2221 Caalexico Way South	St. Petersburg, FL 33712
D/S	Mother Dara Knight	1807 52nd Street South	Gulfport, FL 33707
D	Mother Lillie M. Nash	1401 9th Street South	St. Petersburg, FL 33705
D	Sister Andrea J. Thomas	2330 Caalexico Way South	St. Petersburg, FL 33712

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)(l), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

31 Aug 01

Daytime Phone #

CR2E081 (3/99)