

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

08 APR -7 AM 11:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N93000002661

1. Corporation Name

PHILIPPI MISSIONARY BAPTIST CHURCH, INC.

**REINSTATEMENT 06-08**

2. Principal Office Address - No P.O. Box #

9232 GIBSON AVENUE

Suite, Apt. #, etc.

3. Mailing Office Address

9232 GIBSON AVENUE

Suite, Apt. #, etc.

City & State

JACKSONVILLE, FLORIDA

City & State

JACKSONVILLE, FLORIDA

Zip

32208

Country

DUVAL

Zip

32208

Country

DUVAL

4. Date Incorporated or Qualified  
To Do Business in Florida

6/15/1993

5. FEI Number

59-3160966

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

GEORGE BRANTLEY

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

9232 GIBSON AVENUE

Suite, Apt. #, Etc.

City

JACKSONVILLE

State

FL

Zip Code

32208

The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

*George Brantley*

REGISTERED AGENT MUST SIGN

Date 4-2-08

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
Deacon	GEORGE BRANTLEY	9248 2ND. AVENUE	JACKSONVILLE, FLA 32208
Deacon	WILLIE S. BELL	4663 PORTSMOUTH AVENUE	JACKSONVILLE, FLA. 32208
Deacon	JOHN L. LEWIS	2324 W. 28TH STREET	JACKSONVILLE, FLA 32209
	<i>[Signature]</i>		900122428079 04/07/08--01013--007 **192.50

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 contained in Chapter 119, 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: *George Brantley* George Brantley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-08 (904) 764-1982

Date

Daytime Phone #