

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

09 APR -9 PM 1:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 193000004823 (1)

1. Corporation Name

LOVE And Unity Christian Center Inc.

**REINSTATEMENT** 01-09

900149335519  
04/09/09--01044--004 \*\*192.50

CR2E081 (12/07)

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

1481 Bougainvillea Drive  
Suite, Apt. #, etc.

3. Mailing Office Address

2667 SW Fair Isle Rd.  
Suite, Apt. #, etc.

City & State

Port St. Lucie, FL.

Zip Country

34953 St. Lucie

City & State

Port Saint Lucie FL.

Zip Country

34987 Saint Lucie

4. Date Incorporated or Qualified  
To Do Business in Florida

10/20/93

5. FBI Number

65-0447041

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☒

\$3.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Rev. David L. Jones

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

2667 SW Fair Isle Rd.

Suite, Apt. #, Etc.

City

Port Saint Lucie

State

FL

Zip Code

34987

☒ 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

David Lee Jones  
REGISTERED AGENT MUST SIGN

Date

3/23/09

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
P	Rev. David L. Jones	2667 SW Fair Isle Rd.	Port St. Lucie, FL 34987
D	Herbert Benjamin JR.	1616 Ave M.	Fort Pierce, FL 34950
D	Sandra Benjamin	3901 SW Jarner Rd.	Port St. Lucie, FL 34953
D	Natasha Lindor	323 Winter Lane	Port St. Lucie, FL 34953
V	Joyce A Jones	2667 SW Fair Isle Rd.	Port St. Lucie, FL 34987

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:

Rev. David Lee Jones  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rev. David L. Jones

Date

3/23/09

Daytime Phone #

772-634-3858