

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000002885

1. Corporation Name

PLEASANT HILL PRESBYTERIAN CHURCH, Inc.

~~409-9063~~

2. Principal Office Address - No P.O. Box #
3250 PLEASANT HILL ROAD

3. Mailing Office Address
P.O. Box 772259

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

KISSIMMEE, FLORIDA

City & State

ORLANDO, FLORIDA

Zip

34746-3067

Country

USA

Zip

32877-2259

Country

USA

7. Name and Address of Current Registered Agent

Name

FRAZIER, DONALD E

Street Address (P.O. Box Number is Not Acceptable)
2235 EMPEROR DRIVE

Suite, Apt. #, Etc.

City

KISSIMMEE

State

FL

Zip Code

34744-6010

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

Donald E Frazier

REGISTERED AGENT MUST SIGN

Date 01-15-2009

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
D	FRAZIER, DONALD	2235 EMPEROR DRIVE	KISSIMMEE, FL 32837-6010
D	CAROTHERS, RUSSELL	3028 DREMA DRIVE	SAINT CLOUD, FL 34769-5514
D	KLUKOW, JAMES	1318 WINTHROP DRIVE	ROCK HILL, SC 29732-2348
	<i>M2/5</i>		

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:

Donald E Frazier

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-15-2009

Date

407-858-0635

Daytime Phone #

FILED

09 FEB -5 PM 4: 36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000141891950
02/05/09--01039--009 **183.75

000141891950
01/23/09--01050--001 **428.75

REINSTATEMENT 03-09

4. Date incorporated or Qualified
To Do Business in Florida 06/10/1994

5. FEI Number
59-3079253

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

☐ 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.