

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JUL 13 PM 2:32

SECRET
FALL 2005

DOCUMENT # N94000003559

1. Corporation Name

THE DOWNTOWN CATHEDRAL ENTERPRISES, INC.

2. Principal Office Address

506 E. HARRISON STREET

Suite, Apt. #, etc.

City & State

TAMPA FL

Zip

33601

Country

USA

3. Mailing Office Address

P.O. BOX 172066

Suite, Apt. #, etc.

City & State

TAMPA FL

Zip

33602

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

07/15/1994

5. FEI Number

530204696

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

BISHOP MCKINLEY YOUNG

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

101 EAST UNION STREET

Suite, Apt. #, Etc.

SUITE 301

City

JACKSONVILLE

State

FL

Zip Code

32202

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

REGISTERED AGENT MUST SIGN

Date

07/09/05

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
P/D	BRYANT A. FAYSON	10843 HOFFNER EDGE DRIVE	RIVERVIEW, FL 33569
D	E. MICHELLE ARMSTRONG	4006 GOLF VILLAGE LOOP #4	LAKELAND, FL 33809
D	TRACEY J. BRUNSON	12252 DAWN VISTA DRIVE	RIVERVIEW, FL 33569
D	EVELYN FOSSITT-JONES	6340 S. RENELLIE COURT	TAMPA, FL 33616
D	BOOKER T. LUNDY	2104 W. BEACH STREET APT. A	TAMPA, FL 33607
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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:

President

6/23/05

Date

813-318-0816

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E081 (01/05)