PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 DEC 13 AM 10: 22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000004242

1. Corporation Name
EAST LARGO CONGREGATION OF JEHOVAH'S WITNESSES, INC.

~~WAS USED~~

2. Principal Office Address	3. Mailing Office Address
15551 59TH ST. N.	2230 WHITE OAK CIR.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: CLEARWATER, FL.	City & State: CLEARWATER, FL
Zip: 33760 Country:	Zip: 33763 Country:

96-04

11-05-04 01052 011 $70.00

4. Date Incorporated or Qualified To Do Business in Florida: 12-1-04

5. FEI Number: 59-2379422 ☐ 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: ANTONIS CHRISTODOULOU

Street Address (P.O. Box Number is Not Acceptable): 2230 WHITE OAK CIR.

Suite, Apt. #, Etc.:

City: CLEARWATER, F | State: FL | Zip Code: 33763

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: [signature] President Date: 12-2-04
REGISTERED AGENT MUST SIGN

CR2E081 (01/04)

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
Pres	ANTONIS CHRISTODOULOU	2230 WHITE OAK CIR	CLEARWATER, FL. 33763
V.P.	HERBERT D. LEGGETT	2147 GROVE PL.	CLEARWATER, FL. 33764
Sec.	LELAND A. BURRESS	14854 55TH WAY N.	CLEARWATER, FL. 33760

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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.

Leland A. Burress

SIGNATURE: Leland A. Burress 12-2-04 (727) 530-3888
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #