

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 MAR 21 PM 2:39

DOCUMENT # **N 95000004666**

**1. Corporation Name**

**Renewal Baptist Church of Orlando  
Inc.**

**2. Principal Office Address**

**118 E. Par Street - Location**

Suite, Apt. #, etc.

City & State

**Orlando, FL.**

Zip

**32804**

Country

**U.S.A.**

**3. Mailing Office Address**

**12527 N. Grassy Lake Rd  
Clermont FL. 34711**

Suite, Apt. #, etc.

City & State

**Clermont, FL.**

Zip

**34711**

Country

**U.S.A.**

corp

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

**9-28-95**

**5. FEI Number**

**NA**

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

**Julia Batista - Pastor**

**900013542589**

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

**12527 N. Grassy Lake Rd.**

Suite, Apt. #, Etc.

**03/05/03 01031 002 \*\*192.90**

City

**Clermont**

State

**FL**

Zip Code

**34711**

**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

**Julia Batista**

REGISTERED AGENT MUST SIGN

Date **3-15-03**

**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
Pastor	Rev. Dr. Julia Batista	12527 N. Grassy Lake Rd	Clermont, FL. 34711
Secretary	Mrs. Haydée Roig	7203 Gentry Lane	Orlando, FL. 32818
Treasurer	Mr. Francisco Rivera	300 Lakepark Trail	Oviedo, FL. 32765
Decons Pres.	Mrs. Sandra F. Repollet	18240 Lynbrook Rd.	Orlando, FL. 32820
			<b>900013542589</b>
			<b>03/21/03--01004--009 **61.25</b>

**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:

**Julia Batista - Julia Batista**

**2-26-03**

Date

**352-242-2046**

Daytime Phone #

CR2E081 (9/01)