

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

98 JAN 30 AM 8:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000000890

1. Corporation Name

UNITED FAMILY BAPTIST CHURCH INC.

Principal Place of Business

Mailing Address

3031 NW 187 ST.
CAROL CITY FL 33056

3031 NW 187 ST.
CAROL CITY FL 33056



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

02/20/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. FEI Number

65-0772534

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D	HAZEL, JAMES E	3031 NW 187 ST.	CAROL CITY FL 33056
D D	GAYLE, LYDIA Donna Gayle	7210 FAIRWAY BLVD. 18722 N.W. 32 ct.	MARAMAR FL 33023 MIAMI FL 33056
D	JAMES, ELMINER	2984 NW 193 TER.	MIAMI FL 33056
D	LAWRENCE, SYLVIA	2820 NW 180 ST.	OPA LOCKA FL 33054
REINSTATEMENT 96-97			
<i>a. alamy</i> 1/30/98			

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HAZEL, JAMES E
3031 NW 187 ST.
CAROL CITY FL 33056

Name

200002422782-7

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

-02/05/98-01100-003

Suite, Apt. #, Etc.

200002422782-7

City

-02/05/98-01100-004

****175.15 State ****175.00

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

James E. Hazel

REGISTERED AGENT MUST SIGN

Date

11/20/97

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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:

James E. Hazel

JAMES E. HAZEL

11/20/97

305-624-8034

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/97)