

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLET

APPROVAL
AND
FILED

05 APR 18 AM 11:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000002492

1. Corporation Name

FIRST MISSIONARY BAPTIST CHURCH OF HIGHLAND PINES

2. Principal Office Address

4711 E 21st AVENUE

Suite, Apt. #, etc.

3. Mailing Office Address

4711 E 21st AVENUE

Suite, Apt. #, etc.

City & State

TAMPA, FL

Zip

33605

Country

USA

City & State

TAMPA, FL

Zip

33605

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

5/6/96

5. FEI Number

59-3380052

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

JENNIFER CARTER DIXON

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

1912 East Genesee St

Suite, Apt. #, Etc.

700054211217

05/10/05--01051--013 ***421.75

City

TAMPA

State

FL

Zip Code

33610-6148

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]

REGISTERED AGENT MUST SIGN

Date

04-14-05

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
D	Cleveland Lane	4711 E 21 st Avenue	TAMPA, FL 33605
T	Willie Lewis	4711 E 21 st Avenue	TAMPA, FL 33605
T	Arthur Miller	4711 E 21 st Avenue	TAMPA, FL 33605
T	Frank Carter, Jr.	4711 E 21 st Avenue	TAMPA, FL 33605
D	Willie Foreman	4711 E 21 st Avenue	TAMPA, FL 33605
D	Marcus Gardner	4711 E 21 st Avenue	TAMPA, FL 33605

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:

Frank Carter, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/05

Date

(813) 205-7880

Daytime Phone #

CR2E081 (01/05)