

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

02 MAY -6 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N96000004938

1. Corporation Name

CANAAN MINISTRIES OF DAVENPORT, INC.

Principal Place of Business

736 DIAMOND ACRES ROAD
DAVENPORT FL 33837

Mailing Address

736 DIAMOND ACRES ROAD
DAVENPORT FL 33837

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/23/1996

5. FEI Number

59-3449658

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$3.75 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
T	DAY, MARK	15870 E. LAKESHORE DR.	HOPE IN 47246
TV	BEAN, DANIEL C JR	120 PETTEWAY DR 354 Vineyard Dr	LAKELAND FL 33809
TV	BEAN, MICHAEL J	19 FOREST DR 4031 Kathleen Rd.	DAVENPORT FL
TP	BEAN, DANIEL C SR	4625 FDC GROVE RD 736 Diamond Acres	DAVENPORT FL 33837
			800005978418-3
			06/25/02-01046-030
			****131.25 ****131.25

8. Name and Address of Current Registered Agent

BEAN, DANIEL C SR
736 DIAMOND ACRES RD
DAVENPORT FL 33837

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Daniel C Bean
REGISTERED AGENT MUST SIGN

Date

4-26-02

11. 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:

Daniel C Bean
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-26-02

Daytime Phone #

863-421-8245

282

Conversation of George -

Received app. for reinstatement -
you did not receive other form -
Please advise on other fees.

il never received
a certificate of status
by return mail -

Thank
you

Hyllis Bean
736 Diamond Acres
Davenport Fla
33837

863-421-8245

122.50
+ 8.75
131.25

Rose -