

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

6

APPLICATION FOR REINSTATEMENT

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

DOCUMENT # N96000005791

1. Corporation Name

MINISTERS' CONFERENCE OF THE PALM BEACHES, INC.

Principal Place of Business Mailing Address  
3900 BROADWAY 3900 BROADWAY  
W. PALM BEACH FL 33401 W. PALM BEACH FL 33401



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 11/13/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 31-1526701	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
1	2	3	4
PD	CLARK, ISIAH S JR.	1921 HILTONIA CIRCLE	W. PALM BEACH FL 33407
VD	WILLIAM, BURIE	1200 W. 32ND STREET	RIVIERA FL 33404
SD	SEARS, NATHAN N	1433 W. 9TH STREET	RIVIERA BEACH FL 33404
TD	DRAYTON, TONY	1524 35TH STREET	RIVIERA BEACH FL 33404

04-27-00 90128 024 \$70.00

M117

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PARRISH, BRUCE W JR.  
105 SOUTH NARCISSUS AVENUE  
SUITE 701  
W. PALM BEACH FL 33401

Name  
CLARK, ISIAH S JR  
Street Address (P.O. Box Number is Not Acceptable)  
1921 HILTONIA CIRCLE  
Suite, Apt. #, Etc.  
City  
West Palm Beach  
State  
FL  
Zip Code  
33407

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  
REGISTERED AGENT MUST SIGN

Date 10/10/2000

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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Isiah S. Clark, Jr. 10-10-2000 561 8457320  
Date Daytime Phone #



3900 Broadway,  
West Palm Beach, Florida 33407

Phone: (561) 845-7320

or 832-2110

Fax: (561) 863-7329

**President:**

REV. BURIE W. WILLIAMS

(561) 659-4921

**Vice President:**

REV. JAMES RUSSELL

(561) 712-1580

**Secretary:**

REV. NATHAN N. SEARS

(561) 848-6913

**Treasurer:**

REV. J. R. McFADDEN

(561) 863-4691

Ministers Conference Of The Palm Beaches

Monday, October 23, 2000

Dear Sir:

We sent you a check in the amount of \$70.00 during the month of May 2000. A report was sent to us for corrections; however, the request for corrections was not received by us.

We are requesting that the penalty be waived and we be reinstated as a non-profit corporation in the state of Florida. Thank you.

Very sincerely,

Rev. Burie W. Williams