PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
99 NOV 29 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N97000001268**

1. Corporation Name

PONTE VEDRA BAPTIST CHURCH, INC.

Principal Place of Business	Mailing Address
~~2320 S 3RD ST~~ ~~STE 8A~~ ~~JACKSONVILLE BEACH FL 32250~~ ~~US~~	P O BOX 309 PONTE VEDRA BEACH FL 32004

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

REINSTATEMENT 99

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
1050 Highway A1A	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Ponte Vedra Beach, FL	City & State
Zip: 32082 County: St. Johns	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 02/28/1997 SP

5. FEI Number: 59-3435781 ☐ 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 3	City / State / Zip 4
PPD	BENNETT, GREGG	221 STELLAR CT	PONTE VEDRA FL 32082
VPCD	~~EDWARDS, BRUCE~~ Sewell, W. Errol	~~3380 LIGHTHOUSE POINTE LN~~ 501 Pheasant Run Drive	~~JACKSONVILLE FL 32250~~ Ponte Vedra, FL 32082
~~VPCD~~	~~MATHIS, CHARLES~~	~~103 OVERLOOK DR~~	~~PONTE VEDRA FL 32082~~
SDS	MCNANEY, BONNIE	116 REGENST PL	PONTE VEDRA FL 32082
TD	CASILLAS, AMATLIN S	259 CHARLEMAGNE CIR	PONTE VEDRA FL 32082
~~T~~	~~SNIPES, JACK E~~	~~7 SEABASS LN~~	~~PONTE VEDRA FL 32082~~

8. Name and Address of Current Registered Agent

ROWE AND ROWE, P.A.
9471 BAYMEADOWS RD, SUITE 203
JACKSONVILLE FL 32256

9. Name and Address of New Registered Agent

Name

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

00000307293O--5

Suite, Apt. #, Etc. -12/16/99--01067--012
****245.00 ****245.00

City | State: FL | Zip Code

CR2E040 (8/99)

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: Robert L Rowe Jr Attest Asst Sec

REGISTERED AGENT MUST SIGN

Date: 11-23-99

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: Gregg Bennett Attest Asst Sec

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gregg Bennett, President

November 17, 1999 (904)285-4288
Date Daytime Phone #

0000010 AF