

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 JAN 17 AM 9:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N97000005273**

1. Corporation Name

**AMERICAN INTERNATIONAL
MISSIONS, INC.**

100009921061
01/23/03--01034--016 **227.50

2. Principal Office Address **51 "B"**

BEACHCOMBER WAY

Suite, Apt. #, etc.

City & State

ST. AUGUSTINE FL

Zip

32084

Country

St. Johns

3. Mailing Office Address

← SAME

Suite, Apt. #, etc.

City & State

FLORIDA - ST. AUGUSTINE

Zip

Country

100009921061
01/07/03--01046--002 **70.00

REINSTATEMENT 02-03

**4. Date Incorporated or Qualified
To Do Business in Florida**

9-19-97

5. FEI Number

59-308-2183

Applied For

☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

**\$8.75 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name

Rev. GLEN E. FRIESE

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

51 "B" BEACHCOMBER WAY

Suite, Apt. #, Etc.

City

St. Augustine

State
FL

Zip Code

32084

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

Rev. Glen E. Fries

REGISTERED AGENT MUST SIGN

Date **12-29-2002**

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
Director	R	KNIGHT CONSULTING Co.	3/521
Treas.	AC. KNIGHT III C.P.A.	U.S. 17 BRUNSWICK GA	Brunswick, Georgia
Sec.	PEGGY J. FRIESE wife	51 "B" BEACHCOMBER WAY	32084
Director	MRS.		
V. P.	SARAH R. OLMER	132 LAUREN PL.	St. Augustine, FL 32080
PRES.	Glen E. FRIESE Rev.	51 "B" BEACHCOMBER WAY	St. Augustine, FL 32084
V. P.	ALISON G. VERSAILLES	1015 VILLA LANE	BOYTON BEACH, FL 33435

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:

Rev. Glen Edwin Fries
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/29/2002

Daytime Phone #

904 - 925-0188

CR2E081 (9/01)