PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
98 DEC 30 AM 8:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N97000005542**

1. Corporation Name

WILLIAMS MEMORIAL CHURCH OF GOD IN CHRIST, INC.

Principal Place of Business	Mailing Address
127 NE 15TH ST GAINESVILLE FL 32601	127 NE 15TH ST GAINESVILLE FL 32601

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

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2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida: 09/29/1997

5. FEI Number: 59-3512688 — ✓ 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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
DPT	HAMLET, ALICE	2343 4TH AVE S	ST PETERSBURG FL 33712
DV	WILLIAMS, FRANK	6312 NE 27TH AVE	GAINESVILLE FL 32609
DS	WALKER, WILLETT D	3503 MENO DR	BALTIMORE MD 21215
			800002733588--6
			-01/07/99--01081--005
			****236.25 ****236.25
		89 12/31	

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
WILLIAMS, FRANK 127 NE 15TH ST GAINESVILLE FL 32601	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City — State: FL — Zip Code

CR2E040 (9/98)

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: Frank Williams — SIGNATURE REQUIRED — REGISTERED AGENT MUST SIGN — Date 12-6-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☐ No ☑ (See other side for information on intangible tax.)

12. 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: Alice M. Hamlet — ALICE M. HAMLET — 12-7-98 — 727-327-1846

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #