

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

00 APR 14 AM 8:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000000521

1. Corporation Name

KAIROS PRISON MINISTRY, INC

Principal Place of Business

Mailing Address

~~338 KATHLEEN PL~~ ~~FT WALTON BEACH, FL 32548~~
~~338 KATHLEEN PLACE~~ ~~FT WALTON BEACH, FL 32548~~

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

2. New Principal Office Address, If Applicable
1301 N.W. 2ND AVE

Suite, Apt. #, etc.

City & State

DELRAY BEACH, FL

Zip

Country

33444

USA

3. New Mailing Office Address, If Applicable
1301 N.W. 2ND AVE

Suite, Apt. #, etc.

City & State

DELRAY BEACH, FL

Zip

Country

33444

USA

4. Date Incorporated or Qualified
To Do Business in Florida

01/28/1998

5. FEI Number

59-3509098

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PRES	DONALD S. JAKUBEK "D"	1301 N.W. 2ND AVE	DELRAY BEACH, FL 33444
VP	JOHN W. FINLEY JR "D"	265 S. 18TH ST	DEFUNIAK SPRINGS, FL 32433
SEC/TR	ALBERT B. PACITTI "D"	108 PARADISE HARBOR BLVD	NORTH PALM BCH, FL 33408
			300003222163--9 -04/25/00--01013--003 *****51.75 *****51.75
			300003222163--9 -04/25/00--01013--004 *****245.75 *****245.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

JOHN W. FINLEY JR

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

265 S. 18TH ST

Suite, Apt. #, Etc.

City

DEFUNIAK SPRINGS

State

FL

Zip Code

32433

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

John W. Finley Jr.

REGISTERED AGENT MUST SIGN

Date

3-20-00

11. This corporation owes the current year.
Intangible Personal Property Tax due June 30.

Yes ☐ No ☒

(See other side for information
on intangible tax.)

KE

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:

John W. Finley Jr.
JOHN W. FINLEY JR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-20-00

Date

850-892-7066

Daytime Phone #

CP2E081 (12/98)