

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR **99**  
REINSTATEMENT

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



FILED

99 JUN 18 PM 1:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **198000002500**

1. Corporation Name **BIBLE BAPTIST CHURCH  
OF ORLANDO, CORP.**

Principal Place of Business Mailing Address  
**1612 BRUTON BLVD. 1933 WILLIAMS MANR. Av.**  
**ORLANDO, FL 32805 ORLANDO, FL 32811**

**REINSTATEMENT**

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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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		APRIL 29, 1998	
City & State		City & State		5. FEI Number	
Zip		Country		59-35021209	
				6. CERTIFICATE OF STATUS DESIRED <input checked="" 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)

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
D	LILLIE JEAN CONWAY	1933 WILLIAMS MANOR AVE	ORLANDO, FL 32811-4130
D	LARRY E. JOHNSON	7207 PLEASANT DR.	ORLANDO, FL 32818
D	GENEVA MAYNARD-MIMS	521 N. CAPEN AV.	WINTER PARK, FL 32789

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-06/24/99--01085--001  
\*\*\*\*245.00 \*\*\*\*245.00

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
<b>LUCIOUS CONWAY, JR.</b> <b>1933 WILLIAMS MANOR AVE.</b> <b>ORLANDO, FL 32811-4130</b>		Name <b>LILLIE JEAN CONWAY</b>	
		Street Address (P.O. Box Number is Not Acceptable) <b>1933 WILLIAMS MANOR AVE.</b>	
		Suite, Apt. #, Etc.	
		City <b>ORLANDO</b>	State <b>FL</b>

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 **L. J. Conway** Date **16 June 99**  
REGISTERED AGENT MUST SIGN

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: **LILLIE J. CONWAY** 16 June 99 (407) 293-3492  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day-time Phone #

CR2040 (1/98)