

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JAN -7 AM 10:55

SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **N98000003314**

1. Corporation Name

UNITED CHURCH OF THE LORD JESUS CHRIST, INC.

Principal Place of Business

820 CRESTWOOD ST
JACKSONVILLE FL 32208

Mailing Address

P O BOX 3675
JACKSONVILLE FL 32206-0675

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

06/09/1998

5. FEI Number

75-3091642 **APPLIED FOR**

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 |
|---------------|---|--|-------------------------|
| P | BROWN, WILBERT A | 2503 BLUEBERRY LN | JACKSONVILLE FL 32211 |
| T | TELFAR, HELEN C | 4421 LINN STREET | JACKSONVILLE FL 32206 |
| T | WOODARD, JOHNNIE DECON | 8842 YEOMAN DR | JACKSONVILLE FL 32208 |
| S | WHITFIELD, GEORGIA | 433 MAKO DRIVE | ATLANTIC BEACH FL 32233 |
| T | PLATT, EUGENE EVAN | 11291 HARTS ROAD | JACKSONVILLE FL 32218 |
| | | | |

8. Name and Address of Current Registered Agent

BROWN, WILBERT A
2503 BLUEBERRY LN
JACKSONVILLE FL 32211

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

Wilbert A. Brown
SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date **1/2/03**

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:

Wilbert A. Brown
SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/2/03
Date

Daytime Phone #

CR2ED40 (8/02)

United Church of the Lord Jesus Christ, Inc
P.O. Box 3675
Jacksonville, FL 32206

Jan. 2, 2003

Florida Department of State
Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314

RE: Waiver of Reinstatement Fee

To WHOM IT MAY CONCERN:

It has just come to my attention that my corporation was dissolved due to Failure to File Annual Reports. This is not true. Timely reports were made annually. The last report submitted 5/18/02 with a check for \$61.25 was returned for not containing FEI Number, per the attached letter. I thought the matter was corrected since I did not receive any other information from you.

I am submitting Application for Reinstatement with FEI number stated. Since I have already paid, and my check was not returned to me, I am requesting waiver of the reinstatement fee.

Your assistance and consideration in this matter will be greatly appreciated. I await Your reply.

Cordially,

Wilbert A. Brown

