

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 JUL 28 AM 9:55

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08/05/08--01005--014 \*\*726.25

RE B 7/29/08 T 00-08

CR2E081 (12/07)

DOCUMENT # N99000000015

1. Corporation Name

Trustee Corporation of Mt. Olive  
Missionary Baptist Church of South  
Miami, Florida, Inc.

2. Principal Office Address - No P.O. Box #

6316 SW 59th Place

Suite, Apt. #, etc.

3. Mailing Office Address

6316 SW 59th Place

Suite, Apt. #, etc.

City & State

South Miami, FL

City & State

South Miami, FL

Zip

33143

Country

Miami-Dade

Zip

33143

Country

Miami-Dade

4. Date Incorporated or Qualified  
To Do Business in Florida

12/30/98

5. FEI Number

☒ 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

Sharon G. Miller

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

8475 SW 94th Street

Suite, Apt. #, Etc.

315E

City

Miami

State

FL

Zip Code

33156

☐ The reinstatement fee is imposed, except in  
circumstances which the entity did not receive  
the prior notices. By checking this box, you  
are certifying the prior notices were not  
received and requesting the reinstatement  
fee be waived.

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

Sharon G. Miller

REGISTERED AGENT MUST SIGN

Date

7-22-08

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
DP	Russell E. Harris	11846 Hanlin Mill Road	Miami, FL 33170
DFVP	Bernice Ellis	6521 SW 58th Avenue	So. Miami, FL 33143
DSVP	Anthony Stukes	29607 SW 158th Court	Homestead, FL 33023
DT	James P. Jackson	6289 SW 59th Place	So. Miami, FL 33143
DS	Sharon G. Miller	8475 SW 94th Street, #315E	Miami, FL 33156
(Continued on Exhibit "A" attached)			

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 contained in Chapter 119, 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:

Sharon G. Miller

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

7-22-08 (305) 642-7741

Daytime Phone #

**Exhibit "A"**  
(No. 9 continued)

D	Waymon H. Brown	6520 S.W. 58 <sup>th</sup> Avenue	So. Miami, FL 33143
D	Luther P. Banks, Sr.	6720 S.W. 53 <sup>rd</sup> Court	So. Miami, FL 33143