

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 JUL 31 PM 12:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # *N99000004153*

1. Corporation Name

*GREATER MERCY MISSIONARY Baptist
Church, Inc.*

REINSTATEMENT *01-06*

07/12/05 01036016 \$428.75
CR2E081 (12/05)

2. Principal Office Address

1135 N.W. 3RD AVE

Suite, Apt. #, etc.

3. Mailing Office Address

1135 N.W. 3RD AVE

Suite, Apt. #, etc.

City & State

Miami Florida

Zip

33136

Country

U.S.

City & State

Miami Florida

Zip

33136

Country

U.S.

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

65-0921240

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

Willie L Williams

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

3553 SW 173rd terr

Suite, Apt. #, Etc.

200057346502

*08/08/06--01054--001 **113.75*

City

MIRAMAR

State

FL

Zip Code

33029

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

Willie L Williams
REGISTERED AGENT MUST SIGN

Date *7/24/06*

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	<i>7/24/06</i> City / State / Zip
PD	WILLIE L. WILLIAMS	3553 SW 173rd terr	MIRAMAR FL. 33029
VP	CREOLA Williams	3553 SW 173rd terr	MIRAMAR FL. 33029
COD	CLIFFORD McCullough	2901 N.W. 189th st	MIAMI FL 33056
S	Celeste Mills	2000 N.W. 55 terr	MIAMI FL. 33142
T	DESIREE Williams	1946 NW 91st Street	MIAMI FL 33146
T	Adrian Williams	2000 NW 55 terr	MIAMI FL 33142

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:

Willie L Williams
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #