

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 JAN 21 AM 9:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



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

DOCUMENT # **N 99000007438**

1. Corporation Name

JOYFUL SERVANTS LUTHERAN CHURCH

2. Principal Office Address

8158 BRINEGAR CIR

Suite, Apt. #, etc.

City & State

TAMPA, FL

Zip

33647

Country

3. Mailing Office Address

8158 BRINEGAR CIR

Suite, Apt. #, etc.

City & State

TAMPA, FL

Zip

33647

Country

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

12/16/1999

5. FEI Number

593406897-

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$6.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 02

7. Name and Address of Current Registered Agent

Name

David Gardner Tweed

200010384292

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

8158 Brinegar Circle

01/21/03--01034--011 **245.00

Suite, Apt. #, Etc.

City

Tampa

State

FL

Zip Code

33647

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

David Gardner Tweed

Date

1-6-03

REGISTERED AGENT MUST SIGN

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
PD	David Gardner Tweed	8158 Brinegar Circle	Tampa FL 33647
TD	Joseph T. Gelalia	9539 Norchester Circle	" " "
SD	Lisa Ellam	8502 Parrots Landing	" " "
D	Rob Houghton	9218 Pebble Creek Dr	" " "

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 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:

David Gardner Tweed

1-6-03

Date

813-866-3200

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/123

CR2E081 (8/01)