

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 702009

1. Corporation Name

New Horizons Christian Church, Inc.

2. Principal Office Address

616 S. Dillard Street

Suite, Apt. #, etc.

City & State

Winter Garden, FL

Zip

34787

Country

USA

3. Mailing Office Address

616 S. Dillard Street

Suite, Apt. #, etc.

City & State

Winter Garden, FL

Zip

34787

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

Feb. 11, 1961

5. FEI Number

59-1268496

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

Euel White

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

1518 Charlotte Lane

Suite, Apt. #, Etc.

City

Orlando

State

FL

Zip Code

32804

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

Euel White

Date

1-31-06

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
V/D	Ray Schmidt	3816 Scarborough Court	Clermont, FL 34711
P/D	Euel White	1518 Charlotte Lane	Orlando, FL 32804
S/D	Philip Walter	1209 Castleport Road	Winter Garden, FL 34787
T	LaVerne White	839 Hammocks Drive	Ocoee, FL 34761

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:

Euel E. White

Euel E. White

1-31-06

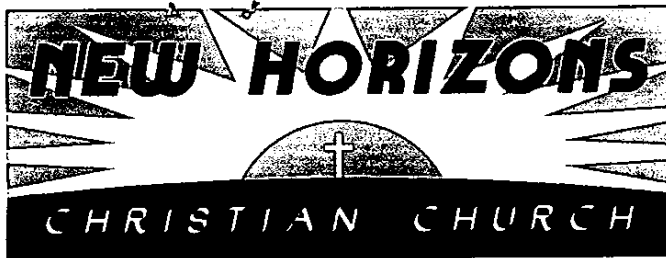
407-760-4235

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
FEB -6 PM 1:55
TALLAHASSEE, FLORIDA
REINSTATEMENT
24-06
T. Roberts
CR2E081 (12/05)
FEB 07 2008



13 24 2

MINISTRY CENTER: 616 S. Dillard Street
Winter Garden, FL 34787
TEL (407) 654-5050 FAX (407) 654-1564
E-MAIL newhorizonscc@hotmail.com
WEBSITE www.NewHorizonsChristianChurch.org

PHILIP WALTER, Senior Minister
CHRIS MARSDEN, Associate Minister
DAVID MCCRICKARD, Worship

January 31, 2006

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

The purpose of this letter is to notify you that New Horizons Christian Church, Inc. did not receive the annual report notices in the years 2004 nor 2005. Along with the annual report for 2006, we are enclosing a check in the amount of \$183.75, which covers the years 2004-2006. Please waive the reinstatement fee.

Sincerely,

Philip Walter
Secretary

PW:jc

Encl.