

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
08 OCT 30 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F01000004156

REINSTATEMENT 02-08

1. Corporation Name

FIVE LEAVES AND TWO FISH
ministries INC.

600137479146
10/30/08--01025--007 **603.75
CR2E081 (12/07)

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

2229 E. 5th Street
Suite, Apt. #, etc.

3. Mailing Office Address

14 Corte Roble
Suite, Apt. #, etc.

City & State

CHARLOTTE, North Carolina

City & State

Santa Rosa Beach, FL

Zip

28204

Country

U.S.A.

Zip

32459

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

08/03/2001

5. FEI Number

31-1743373

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

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.

7. Name and Address of Current Registered Agent

Name: Ronald A. VERNON

Street Address (P.O., Box Number is Not Acceptable):
14 Corte Roble

Suite, Apt. #, Etc.

City: Santa Rosa Beach

State: FL

Zip Code: 32459

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: Ronald A. Vernon

Date: 09/17/2008

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 |
|--------|-----------------------------------|--|----------------------------|
| P, D | Ronald A. VERNON | 14 Corte Roble | Santa Rosa Beach, FL 32459 |
| S, D | Debra VERNON | 14 Corte Roble | Santa Rosa Beach, FL 32459 |
| T, D | Gwen Blythe | 2035 Whitestone Place | Alpharetta Georgia 30005 |
| | | | |
| | | | |

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: Ronald A. Vernon Ronald A. VERNON 09/17/2008 (850) 622-1593
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

10/31