

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N00000007676			
1. Corporation Name THE CONCERT MINISTRY OF TIMOTHY MARK, INC.			
2. Principal Office Address 2012 DENHAM AVE Suite, Apt. #, etc.		3. Mailing Office Address PO BOX 2003 Suite, Apt. #, etc.	
City & State COLUMBIA, TN Zip 38401 Country USA		City & State COLUMBIA, TN Zip 38402 Country USA	

FILED
03 OCT 31 AM 9:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT *AD3*

4. Date Incorporated or Qualified To Do Business in Florida 11/15/00	
5. FEI Number 65-1054004	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 BRENT BLACK		
Street Address (P.O. Box Number is Not Acceptable) 135 CREEK DR Suite, Apt. #, Etc.		
City PORT CHARLOTTE	State FL	Zip Code 33952

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 *[Signature]* **REGISTERED AGENT MUST SIGN** **Date** 10/24/03

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	TIMOTHY PICKELL	2012 DENHAM AVE	COLUMBIA, TN 38401
V/D	STEPHEN PICKELL	16 AMBERVIEW CT.	COLDWATER, MI 49036
S/T/D	DAVID SIMPSON	19543 PINEY LAKE DR.	SPRING, TX 77388
D	JOHN CROSS	13000 TAMiami TR.	NORTH PORT, FL 34287
DD.	TOM MCCOY	1551 W. HARPETH RD.	FRANKLIN, TN 37064

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: *Timothy Pickell*, TIMOTHY PICKELL **10/16/03** 9314909874
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** **Daytime Phone #**

CR2E081 (10/02)



THE CONCERT MINISTRY OF TIMOTHY MARK
music with a mission

October 16, 2003

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Sirs:

Enclosed please find the completed form for corporate reinstatement for THE CONCERT MINISTRY OF TIMOTHY MARK, INC. together with a check for \$61.25 for the filing fee for the Annual Report.

I am asking that you accept the current filing as the main office of the ministry moved to Tennessee in 2003 and the forms for renewal were never received.

Sincerely,

Timothy Pickell
President