PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 04 DEC -9 PM 3: 29
DOCUMENT # NO LOOC 1. Corporation Name	•	SECRETARY OF STATE TALLAHASSEE, FLORIDA
THE Full Cornerstone &	aospel Ministrues	
Thoreporoxed		FEMISTATEMENT 02-04
2. Principal Office Address	3. Mailing Office Address	
1534 SE 1st Ave	6331 NW 32rd St.	
Suite, Apt. #, etc.	Suite, Apt, #, etc.	4. Date Incorporated or Qualified To Do Business in Florida — 10/17/01
City & State	City & State	5. FEI Number Applied For
Garnosville FL Zip Country	Zip Country	59-3465936 Not Applicable
32653-1345 US A	32653-1345 US A	CERTIFICATE OF STATUS DESIRED (2) 58.75 Additional Fee require
	7. Name and Address of Current Regis	jistered Agent
Street Address (P.O. Box Number is Not Acceptable) G331 N.W. 32nd Street Suite, Apt. #, Etc. 11/24/04-01050-002 **192.76 City State Zip Code FL 32053 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 Rows	REGISTERED AGENTIVIST SIGN	81c Date 11/22/04
9. Names and Street Addresses of Each Officer a	and/or Director (Florida nonprofit corporations must list a	at least 3 directors)
Titles Name of Officers and/or Directo	Street Address of E officer and/or Dire	
D Jenkins, Clare	ence 8 Rev 4331 NW 30	and St Gainesville FL 32053
H-Jenkins, Myea	LEVAR 6331 NW 327	nd 87 Gainesville FC 30653
8 Cook, Lawannai	P.O. Box 1214	Alachua, FC32616
T Mack, Bernice	1304 NE 18+ AX	C. Gainesville FL 32601
TR Howard Larg	20x 1220 NE 23Pd	1. Ave Garnesville FL 32001
		1 rig
this reinstatement application, the reason for di owed by the corporation have been paid and th on this application is true and accurate, and my	ssolution has been eliminated, the corporate name satiste names of individuals listed on this form do not qualify a signature shall have the same legal effect as if made u	n as provided for in chapter 607 or 617, F.S. I further certify that when filing tisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees y for an exemption under section 119.07(3)(I), F.S. The information indicated under oath.
SIGNATURE: KULL	lacerce Jene In	11/22/04

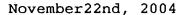


Church Inc.

Rev. Clarence Jenkins, Sr., Founder & Pastor

1534 SE 1st Ave. (church) 6331 NW 32nd St. (home) Gainesville, Fl. 32653-1345

325-376-0262(home) Cljks@BellSouth.Net



Dear Sir or Madam,

We are writing this letter as a request to waive the overdue fees for reasons listed below. Without our knowledge the mailing address set by the charter consultant was incorrect. It came to our attention several months after contacting the charter consultant to inquire where the charter was. We also contacted the state department to inquire where the charter was, but did not receive any response after leaving several messages. We feel that since this was not done intentionally on our part that our request should be granted, however we are sending in the amount due in a money order for \$183.75. We thank you for you time and attention concerning this matter.

F. E. I. #: 59-3749157

Sincerely,

Kewi Charace

e Jenkins, Sr.

11/22/04

Annual Reports not Received:

2001

2002

2003