

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2007 JUN 19 AM 9:57

SECRETARY OF STATE
TALLAHASSEE FLORIDA

500104945375
06/27/07--01055--002 **245.00

REINSTATEMENT

CR2E081 (1/07) 04-07

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 002000006215

1. Corporation Name
Rhema University, Inc.

2. Principal Office Address - No P.O. Box #
4700 Mellenia Blvd.

3. Mailing Office Address
P.O. Box 770897

Suite, Apt. #, etc.
Suite 175

Suite, Apt. #, etc.

City & State
Orlando, FL

City & State
Winter Garden

Zip
32839

Country
Orange

Zip
34777

Country
Orange

4. Date Incorporated or Qualified To Do Business in Florida
08/16/2002

5. FFL Number
270045013

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
Hazel Hamilton

Street Address (P.O. Box Number is Not Acceptable)
1112 Climbing Rose Dr.

Suite, Apt. #, Etc.

City
Orlando

State
FL

Zip Code
32818

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.

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 *Hazel Hamilton*
REGISTERED AGENT MUST SIGN

Date **5/2/2007**

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	Dr. Roger Richardson	4700 Millenia Blvd. #175	Orlando, FL 32839
D	Dr. Ruth J. Barnes	4700 Millenia Blvd. #175	Orlando, FL 32839
D	Gerald Bourne	4700 Millenia Blvd. #175	Orlando, FL 32839
D	Selvon Seebran	4700 Millenia Blvd. #175	Orlando, FL 32839

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: *Hazel Hamilton*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/2/2007

Date

877-270-0349

Daytime Phone #

Rhema University
P.O. Box 770897
Winter Garden, FL 34777

877-270-0349

www.rhemauniversity.com

June 14, 2007

Dept. of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: Reinstatement for Rhema University

To Whom It May Concern:

On May 2, 2007, the Board of Directors of Rhema University met and decided to reinstate the corporation. On this day we signed the form to reinstate the corporation. According to our records keeper and accountant, we did not receive a notice in 2004 and we are therefore requesting that the fees of \$1220.00 be waived. We are enclosing a check for \$245.00 to file the reinstatement form which was signed on May 2, 2007.

Should you have any questions or concerns, you may contact us at 877-270-0349 or by email at info@rhemauniversity.com.

Sincerely,



Hazel Hamilton
Registered Agent