

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 SEP 26 PM 3:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N 28553

1. Corporation Name
HEARTLAND COMMUNITY CHURCH AT
WAUCHULA, INC.

2. Principal Office Address
WEST MAIN STREET

Suite, Apt. #, etc.

City & State
WAUCHULA, FL

Zip Country
33873 USA

3. Mailing Office Address
PO BOX 1304

Suite, Apt. #, etc.

City & State
WAUCHULA, FL

Zip Country
33873 USA

REINSTATEMENT 03

4. Date Incorporated or Qualified
To Do Business in Florida 9/26/88

5. FEI Number
59-2752295

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

7. Name and Address of Current Registered Agent

Name
MICHAEL D MANLEY

Street Address (P.O. Box Number is Not Acceptable)
203 S SEVENTH AVE

Suite, Apt. #, Etc.

City
WAUCHULA

500022915035

09/26/03--01058--024 ***0.00

State Zip Code
FL 33873

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]

Date 9-25-03

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
DS	LAURENCE C WILLIAMS, JR	3799 OAK HILL RANCH RD	20LFO SPRINGS, FL 33890
DP	CARL THORTON	403 PENN. AVE	WAUCHULA, FL 33873
DT	STEVE CANTU	PO BOX 1461	20LFO SPRINGS, FL 33890

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:

[Signature]

LAURENCE C. WILLIAMS, JR 9-23-03

863-781-1383

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E001 (10/02)

9/26

Heartland Community Church
PO Box 1304
Wauchula, Florida 33873

September 25, 2003

Dear Sirs,

Per our phone call, I have enclosed a reinstatement form and fees for \$61.25 plus 8.75
It seems the reason our Uniform Business Report was return to you was an error in
the address. We appreciate your help in this matter.

Thank you,


Heartland Community Church