PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
01 OCT 24 AM 11:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N48946**

1. Corporation Name

NEW HOPE MISSIONARY BAPTIST CHURCH OF HUDSON, FL , INC.

Principal Place of Business	Mailing Address
14236 COUNTY LINE ROAD HUDSON FL 34668	14236 COUNTY LINE ROAD HUDSON FL 34668

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

REINSTATEMENT

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 05/18/1992

5. FEI Number: 59-3130341 — Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☐ — $8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
~~DVP~~ D	~~SHARPLEY, JOHN~~ DRAYTON, ROBERT	~~4294 WELDO NAVE G ROAD~~ 11345 COPLEY COURT	SPRING HILL FL ~~34609~~ 34609
~~VPU~~ D	~~WADE, JOHN~~ TELMAN, BIRTRAM	~~209 GALAXY AVENUE~~ 5119 SILHOUETTE CT.	SPRING HILL FL ~~34606~~ 34607
~~DS~~ D	PORTER, RUTH	4399 GONDOLIER RD.	SPRING HILL FL 34608
D	~~PHIFER, ANTHONY~~ PHILIP, JUDITH	~~2069 BRIDADIER DR.~~ 6021 NOCKLYN RD.	SPRING HILL FL ~~34606~~ 34609
~~D~~	~~HILL, WILLIAM E.~~	~~10398 BEDFORD ROAD~~	~~SPRING HILL FL 34606~~ 34609
D	~~KELSEY, WALTER~~ JONES, TONYA	~~3807 DOTHAN AVE~~ 10549 WOODLAND WATERS BLVD.	~~SPRING HILL FL 34609~~ WEEKI WACHEE, FL 34613

8. Name and Address of Current Registered Agent

~~SHARPLEY, JOHN~~
~~4294 WEDON AVE.~~
~~SPRING HILL FL 34609~~

9. Name and Address of New Registered Agent

Name: DRAYTON, ROBERT
Street Address (P.O. Box Number is Not Acceptable): 11345 COPLEY CT.
Suite, Apt. #, Etc.:
City: SPRING HILL | State: FL | Zip Code: 34609

CR2E040 (8/01)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

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Signature of Registered Agent: Mr Robert Drayton — REQUIRED
REGISTERED AGENT MUST SIGN

Date: 10/24/2001

11. 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: B. Telman — REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 10-21-01

Daytime Phone #: (727) 856 8336