PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
[redacted]
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 NOV -6 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000002164

1. Corporation Name
LIFE CHURCH, INC.

REINSTATEMENT 99-02

2. Principal Office Address	**3.** Mailing Office Address
2160 CREIGHTON RD	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: PENSACOLA, FL	City & State
Zip: 32504 Country: ESCAMBIA	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida: 02 MAY 1994

5. FEI Number: 59-3183463 ☐ 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: ROGER D. McGRAW, SR.
~~11/06/02--01133--001 **428.75~~
900008836799
11/06/02--01133--001 **428.75

Street Address (P.O. Box Number is Not Acceptable): 2160 CREIGHTON RD

Suite, Apt. #, Etc.:

City: PENSACOLA State: FL Zip Code: 32504

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: R D McGraw
REGISTERED AGENT MUST SIGN

Date: 1 NOV 2002

CR2E081 (9/01)

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	ROGER D. McGRAW, SR.	2160 CREIGHTON RD	PENSACOLA, FL 32504
D/BM	MYRA F. McGRAW	5370 WINDHAM RD	MILTON, FL 32570
D/BM/S	M. E. FLEMING	1245 BARMEL ST.	PENSACOLA, FL 32534

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: M E Fleming M.E. FLEMING — 1 NOV 2002 — (850)476-3745
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #