PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS JIVISION OF CORPORATION 701803 99 NOV -9 AMIL: 07 1. Corporation Name CAROL ESTATES BAPTIST CHURCH INC Principal Place of Business Mailing Address 2020 N E 15TH STREET 2020 N E 15TH STREET GAINESVILLE FL 32609 GAINESVILLE FL 32609 05-04-99-90074-034 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 2 New Principal Office Address, If Applicable 12/16/1960 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State 59-6032860 \$8.75 Additional Fee required for a Continuate of Status Country Zip ZiD Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director Name of Officers Title(s) City / State / Zip GUNTER, EMANUEL 1019 NW 30TH AVENUE **GAINESVILLE FL** D HENLEY, DONALD 2832 NE 10TH DRIVE **GAINESVILLE FL 32609** James COWART 4621 NW 32 Th PL. SWEAT, JAMMY L JR. D T **GAINESVILLE FL** Dorothy Brunson 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Dorothy Brunson Brunson HARRY JOYCE M. 1007 NE 7th Ave. Gainesville, FL. 3261 GAINESTILLE CLOSE 02000 State Zip Code Gainesville 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. Signature of Registered Agent A GISTERED AGENT MUST SIGN Date 11- 7-99 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 filling 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. Dove thy Brunson
SIGNATURE AND TYPED OF PRINTED NAME OF SIGN SIGNATURE:

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