PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
00 NOV -6 PM 3:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 705881

1. Corporation Name

COLLEGE ROAD CHURCH OF CHRIST, INC.

Principal Place of Business	Mailing Address
~~1600 TWIGG ST~~ ~~PALATKA FL 32177-4021~~	~~1600 TWIGG ST~~ ~~PALATKA FL 32177-4021~~ ~~US~~

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

REINSTATEMENT 2000

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.: 400 College Road	Suite, Apt. #, etc.: 400 college Road
City & State: PALATKA, Florida	City & State: PALATKA, Florida
Zip: 32177 Country: USA	Zip: 32177 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 07/10/1963

5. FEI Number: 59-2402705 ☐ 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
S/T	OVERTURF, CHARLES	~~RT 4 BOX 335~~ 112 SHERRI LANE	PALATKA FL 32177
T/D	~~SMITH, LAYTON~~ ~~BILL~~ WEAVER, BILL	~~RT 5 BOX 1831~~ 164 RANCHETTE TRAIL	PALATKA FL 32177
~~T~~	~~OVERTUFF, CHARLE~~	~~RT. 4, BOX 335~~	~~PALATKA FL 32177~~
C	~~OVERTUFF, CL~~ OVERTURF, C.L.	158 CONFEDERATE POINT ROAD	PALATKA FL 32177
D	LOTT, GARY	2208 ~~GANN~~ STREET CARR	PALATKA FL 32177 LS
D	~~OVERTUFF, STEVE~~ OVERTURF, STEVE	~~RT 4 BOX 314~~ 111 GRASSY LANE	PALATKA FL 32177

8. Name and Address of Current Registered Agent

WIMBERLY, SAM
190 RODDY ROAD
PALATKA FL 32177

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City | State: FL | Zip Code

700003480257--2
-11/30/00--01005--018
****236.25 ****236.25

CR2E040 (8/00)

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: Sam Wimberly SIGNATURE REQUIRED — Date: 11/01/00

REGISTERED AGENT MUST SIGN

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: Bill Weaver SIGNATURE REQUIRED B.H. Weaver — 11/01/00 — (904)325-5442

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0003517 AF