

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 JAN -8 PM 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 707740

REINSTATEMENT 01-03

1. Corporation Name
FIRST CHRISTIAN CHURCH OF VENICE, INC.

2. Principal Office Address
1100 CENTER RD.
Suite, Apt. #, etc.

3. Mailing Office Address
1100 CENTER RD
Suite, Apt. #, etc.

City & State
VENICE, FL
Zip Country
34292 SARASOTA

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VENICE, FL
Zip Country
34292 SARASOTA

4. Date Incorporated or Qualified To Do Business in Florida 08/24/1964
5. FEI Number 59-6139017 Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

000026409360
01/08/04--01007--010 ***358.75

7. Name and Address of Current Registered Agent

Name
WILLIAM D. MILLER
Street Address (P.O. Box Number is Not Acceptable)
4863 ORANGE TREE PLACE
Suite, Apt. #, Etc.
City
VENICE
State
FL
Zip Code
34293

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 William D. Miller Date 12-29-03
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
PD	JOHN LLOYD	429 LAKE OF THE WOODS DR	VENICE, FL 34293
VD	WILLIAM STEBBINS	656 BACK NINE DR	VENICE, FL 34285
SD	JEAN WEBB	414 DIMINI AVE.	VENICE, FL 34285
TE	RICK STOLTZ	4283 TENNYSON WAY	VENICE, FL 34293
T	WILLIAM JOHNSTON	5028 SOUTHERN PINE CIRCLE	VENICE, FL 34293
T	MIKE RIBBON	861 DA-HOON CIR.	VENICE, FL 34293

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)(f), 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: William E. Stebbins WILLIAM E. STEBBINS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 12/29/2003 Daytime Phone # 941-408-1871

CR2E001 (10/02)