


FILED
13 FEB 20 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
<div>DOCUMENT # 711447</div> <div>1. Corporation Name South Lake Presbyterian Church, Inc.</div>					
2. Principal Office Address - No P.O. Box # 131 Chestnut St.		3. Mailing Office Address 131 Chestnut St.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Clermont		City & State Clermont			
Zip 34711	Country USA	Zip 34711	Country USA		
4. Date Incorporated or Qualified To Do Business in Florida 10/18/1966		5. FEI Number 59-1088544			
6. CERTIFICATE OF STATUS DESIRED YES		Applied For Not Applicable			
7. Name and Address of Current Registered Agent Name Leslie Rocha Street Address (P.O. Box Number is Not Acceptable) 131 Chestnut St. Suite, Apt. #, Etc.		01/29/13--01019--002 **306.25			
City Clermont		State FL		Zip Code 34711	
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 <u>Leslie Rocha</u> Date <u>2/12/2013</u> 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	
Pr.	Judy Lineberry	60811 Lake Kirkland Dr		Clermont, FL 34714	
V-P	Swabi Ramnarain	17925 Coralwood Ln PO Box 120254		Groveland, FL 34736 Clermont, FL 34712	
Sec	Ben Andersen	1660 Drew Ave.		Clermont, FL 34711	
				S. HAWKES	
				FEB - 2013	
10. E-mail Address: <u>office@southlakepres.org</u> EXAMINER (To be used for future annual report notification)					
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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.					
SIGNATURE: <u>Judy Lineberry</u> Date <u>2/12/13</u> 352-394-2					