

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
05 MAY -2 PM 6:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 715012

1. Corporation Name  
Church Of Positive Living, A United Church Of Religious Science, Inc.

2. Principal Office Address  
3742 K-Ville Avenue

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Auburndale, Florida

City & State

Zip Country  
33823-9670 USA

Zip Country

4. Date Incorporated or Qualified To Do Business in Florida 7/25/68

5. FEI Number  
591714179

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  
Jackie McGordon

700054208837  
05/10/05--01046--021 \*\*253.75

Street Address (P.O. Box Number is Not Acceptable)  
828 West 2nd Street

Suite, Apt. #, Etc.

REINSTATEMENT 02-05

City  
Lakeland

State Zip Code  
FL 33805-4226

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

*Jackie McGordon*

REGISTERED AGENT MUST SIGN

Date

4-18-05

**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	Jackie McGordon	828 West 2nd Street	Lakeland, FL 33805-4226
VP	Sheryl Laird	611 Interlachen Parkway	Lakeland, FL 33801
S	Elizabeth Partington	1907 Casco Street	Lakeland, FL 33801
T	Beverly Lopes	2575 U.S. 27 North	Haines City, FL 33853
T	Jerry Dunn	602 East Bay Street	Lakeland, FL 33801

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:

*Jackie McGordon*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4-18-05

Daytime Phone #