PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

15 MAR -4 PM 10:36

DOCUMENT # 720103

1. Corporation Name
MEADOWOOD CHRISTIAN FOUNDATION, INC.
W15-9065

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
46 N Washington Blvd	
Suite, Apt. #, etc.: Ste 16	Suite, Apt. #, etc.
City & State: Sarasota FL	City & State
Zip: 34236 Country	Zip Country

CR2E081 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number: 59-1315541 — 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: MARK W. LORD, ATTORNEY AT LAW
Street Address (P.O. Box Number is Not Acceptable): C/O NORTH WASHINGTON BOULEVARD
Suite, Apt. #, Etc.: SUITE 16-D
City: SARASOTA State: FL Zip Code: 34236

300265924321 3
03/04/15--01031--011 **61.25
300265924321 3
02/06/15--01031--026 **236.25

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: Mark W. Lord — Date: 10/30/14
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
P/D	RICHARD A. LORD	C/O MARK W. LORD 46 N WASHINGTON BLVD SUITE 16-D	SARASOTA, FLA. 34236
S/TC T/D	ROBERT F. RUTH, JR.	2702 BRADFORD WAY	SARASOTA, FLA. 34239
D	D. KELMER COUSINS	2528 BOUGAINVILLEA ST.	SARASOTA, FLA. 34231
D	CLIFFORD CAIN	3025 ARLINGTON STREET	SARASOTA, FLA. 34239
D	ROBERT WRIGHT	3513 CORONADO DRIVE #705	SARASOTA, FLA. 34231

REINSTATEMENT

MAR 04 2015
R. HUNT

10. E-mail Address: _____
(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: Richard A. Lord — 10/30/14 — (941)-924-5572
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #