PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
97 NOV 12 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 726248

1. Corporation Name

HOPE EVANGELICAL LUTHERAN CHURCH OF WEST PALM BEACH, FLORIDA, INC.

Principal Place of Business	Mailing Address
970 PIKE ROAD WEST PALM BEACH FL 33411	970 PIKE ROAD WEST PALM BEACH FL 33411

REINSTATEMENT 97

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business In Florida: 04/26/1973

5. FEI Number: 59-1444638 ☐ 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
FS	THIERFELDER, VIC III	820 TUSCALOOSA ST.	WEST PALM BEACH FL
PD	MILLER, CURTIS	15030 75TH LANE 14030 75TH LANE	LOXAHATCHEE FL
SD	MCCLUNG, REX	837 ORCHID DR.	ROYAL PALM BEACH FL
VD	SCHUEZMAN, AL	925 TRIPP DR	W PALM BCH FL
DT	HANNON, TIM	4493 BROOK DR	W PALM BCH FL

11/11/13

8. Name and Address of Current Registered Agent

MILLER, ERIC O
7430 BELVEDERE ROAD
WEST PALM BEACH FL 33411

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

100002340822--4
-11/13/97--01082--016
****236.25 ****236.25

CR2E040 (8/97)

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 X Pastor Eric O Miller Date 11-9-97

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes ☐ No ☐ (See other side for information on intangible tax.)

12. 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: X Curtis F. Miller Curtis F. Miller 11-9-97 (561) 791-0697

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