PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	RPORATI STATEM			Se	DEPART Secretary	y of St			FILED 08 MAR 12 AM 9:21		
DOCUMENT # 728537 1. Corporation Name First Presbyterian Church. Associate Reformed Synob,									SECRETARY OF STATE TALLAHASSEE, FLORIDA		
2. Principal Office Address - No P.O. Box # 215 East Circle Street P. O. Box					ffice Address 1326			03/12	00120115981 708-01034002 **183.75 cr2e081 (12/07)		
Suite, Apt. #,	, etc.			Suite, Apt. #, e	atc.				porated or Qualified iness in Florida 12/31/1973		
City & State Avon Par				City & State Avon Park	City & State Avon Park, FL.			5. FEI Numbe 23-710914	er Applied For		
Zip 33825	· 1		untry Zip S. 33826			Count U. S	•	6.			
		7. Na	me and Address of	Current Regist	tered Ager	nt		 			
Name Thompson, David								The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you			
Street Address (P.O. Box Number is Not Acceptable) 2101 Bayside Drive							the pri				
Suite, Apt.	 .								are certifying the prior notices were not received and requesting the reinstatement		
City Sebring,			State Zip Code FL 33872			fee be	fee be waived.				
8. I, being appointed the registered agept 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 REGISTER AGENT MUST SIGN									_{Date} <u>3-10-08</u>		
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)											
Titles			Name of ers and/or Directors	-	Street Address of Eac Officer and/or Directo			ach	City / State / Zip		
D	Thomas Christoph				3031 Oak Hill Drive				Avon Park, FL. 33825		
Т	Robert C			2780 E. Waterview Drive				Avon Park, FL. 33825			
D	Eugene	ıdree		2131 Lakeview Drive, Apt. 910			ı. 910	Sebring, FL. 33870			
D	Robert Scranton				1988 Lake Lotela Drive				Avon Park, FL. 33825		
DS	David Thompson				2101 Bayside Drive				Sebring, FL. 33872		
deinstatement 06-0°											
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 contained in Chapter 119, 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: David Thompson 3-10-08 1-863-453-3242 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DEBECTOR Date Daylime Phone #											