PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE CORPORATION 03 OCT 31 AM 9:39 Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE FLORIDA DOCUMENT # 730771 1. Corporation Name St. Luke Missionary Baptist Church of Kissimmee, Inc. REINSTATEMENT 01-13 2. Principal Office Address 3. Mailing Office Address P. O. Box 451630 400 E. Columbia Avenue Suite, Apt. #, etc. Sulte, Apt. #, etc. 4. Date Incorporated or Qualified To Do Business in Florida City & State City & State 5, FEI Number Applied For Kissimmee, Florida Kissimmee, Florida 10-016737 Not Applicable Country Country \$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRED 2 34745-1630 34744 Osceola 7. Name and Address of Current Registered Agent Henry N. Lewis Street Address (P.O. Box Number is Not Acceptable) 1813 Tahiti Place 10/31/03--01043--017 Suite, Apt. #, Etc. Zip Code Kissimmee 34741-2020 8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0505 or 817.0503, F.S. Date \_\_ 10/28/03 Signature of REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director Name of Titles City / State / Zip Officers and/or Directors P/D Rev. Johnny M. McKinnie 3513 Beau Chene Drive Kissimmee, FL. 34746 C/M Henry N. Lewis 1813 Tahiti Place Kissimmee, FL. 34741 D Leonard Chappell 2884 Florida Avenue Kissimmee, FL. 34744 D/T James Hooker 307 Dickson Street Kissimmee, FL. 34744 D/T Ronald C. Lomax 305 Lesesne Street Kissimmee, FL. 34744 D **David Stewart** 1734 36th Street Orlando, FL. 32805 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

## St. Luke Missionary Baptist Church

400 E. Columbia Avenue Kissimmee, Fl. 34744-3430

## Reverend Johnny M. McKinnie, Pastor

Deacon Henry Lewis Chairman of Deacon Ministry Deacon Ronald Lomax Chairman of Trustee Ministry

October 28, 2003

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Dear Division of Corporation Officer:

Attached is a Corporation Reinstatement Form for the St. Luke Missionary Baptist Church of Kissimmee, Inc. It has been brought to our attention that the UBR was not filed during the past three (3) years. It was noted that the forms had been sent to a wrong address and returned. After not hearing from us, your office filed an Administrative Dissolution on 9/21/2001. In a conversation with your office, we were advised that the Reinstatement Form rather than three UBR forms should be submitted to your office with a fee of one hundred eighty-three dollars and seventy-five cents (\$183.75) to cover the costs of the annual filing fees and the copies of The Certificates of Status.

Enclosed is our check number 13225, dated October 28, 2003, in the amount of \$183.75.

If you have questions or need additional information, please feel free to call me at (407) 847-8348.

Many thanks for your assistance in helping us to resolve this matter.

Sincerely,

Rev. Johnny M. McKinnie, Pastor