PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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DOCUMENT # 749640

1. Corporation Name

FAIR HAVEN BAPTIST CHURCH OF ZEPHYRHILLS, INC.

2. Principal Office Address	**3.** Mailing Office Address
5353 5th Street	5353 5th Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Zephyrhills, FL 33541	City & State: Zephyrhills, FL 33541
Zip: 33541 Country: USA	Zip: 33541 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida 11-2-79

5. FEI Number 59-2005971 ☐ 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: RANDALL C. MOBLEY

Street Address (P.O. Box Number is Not Acceptable): 37411 PHELPS RD.

Suite, Apt. #, Etc.:

City: ZEPHYRHILLS State: FL Zip Code: 33541

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: Randall Mobley Date: 10/31/01
REGISTERED AGENT MUST SIGN

CR2E081 (9/00)

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	Dr. Randall Mobley	37411 Phelps Rd.	Zephyrhills, FL 33541
T	Maurice Hammond	4828 Lakeside Dr.	Zephyrhills, FL 33541
S	Linda Mason	36427 Keystone Ave.	Zephyrhills, FL 33541
T	Bob Smith	35750 Clinton Ave.	Dade Ctiy, FL 33525
T	Douglas Santoro	3908 W. Sam Allen Rd.	Plant City, FL 33565
T	Michael Smith	39013 Blue Jay Ave.	Zephyrhills, FL 33540

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: Randall Mobley 10/31/01 813-782-7115
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #