PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	08 JAN -4	
DOCUMENT # 757725 1. Corporation Name 1. Corporat		SECKERLER STATE TALLAHASSEE, FL ORIDA	
Episcopal Churc	frican Metholist h of Daytona		
beach, Florida, Incorporated		400115204224 01/15/0801040014 **481.25	
2. Principal Office Address - No P.O. Box # / 3. Mailing Office Address 580 George W. Ergram Blvd Post Office Box 9717		CR2E081 (1/07)	
Suite, Apt. #, etc. /	Suite, Apt. #, etc.	4. Date Incorporated or Qualifie	autu/1001
City & State Daytong Beach FL	Dautona Beach, FL	To Do Business in Florida 5. FEI Number 592/3862	Applied For Not Applicable
32114 US	Zip Country 32120-9717 US	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of	Current Registered Agent		
Name LESTER J, CUBY Street Address (P.O. Box Number is Not Acceptable) 7 Fox Hollow PR,		The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not	
Suite, Apt. #, Etc.		received and requesting the reinstatement fee be waived.	
ORMOND BEACH State Zip Code 32/74			
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 Date 12/3//07 REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nod profit 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
		ST. Daytor	na Beach, FL 32/14
S DONNELL SLA	DONNELL SLATER 1061 BERKSHIRE ROAD Daytong Beach, FL 321		a Reach, FL 32N7
D Teresa R. Johnson 120 Laurel Valley Court Drytong Beach, FL 321			ng Beach, FL 32117
1 Reva P. Desmore 851 Madison		he. Daytone	Beach, FL 32114
D Linwood Hamilton 1436 Peachtree		Road Dayton	a Beach, FL 32114
D FREddie Harris 1079 LIBBY COURT N. Daytona Beach, FC 32N7			
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 filling 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 examption contained in Chapter 119, F.S. The information indicated on this arbitration is making the corporation and the names of individuals listed on this arbitration contained in Chapter 119, F.S. The information indicated on this arbitration is making the corporation and the names of individuals listed on this arbitration contained in Chapter 119, F.S. The information indicated on this arbitration is making the corporate of the corporate name (a) and the names of individuals listed on this form do not qualify for an examption contained in Chapter 119, F.S. The information indicated on this arbitration is not provided in Chapter 119, F.S. The information indicated on this arbitration is not provided in Chapter 119, F.S. The information indicated on this arbitration is not provided in Chapter 119, F.S. The information indicated on this arbitration is not provided in Chapter 119, F.S. The information indicated on this arbitration is not provided in Chapter 119, F.S. The information indicated on this arbitration is not provided in Chapter 119, F.S. The information indicated on this arbitration is not provided in Chapter 119, F.S. The information indicated on this arbitration is not provided in Chapter 119, F.S. The information indicated on the chapter 119, F.S. The information indicated in Chapter 119, F.S. The information indicated on the chapter 119, F.S. The information indicated in Chapter 119, F.			
SIGNATURE: 1.2 31/0 7 386-255-1195 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Destring Phone #			