

F06000003575

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:**

BETTER LIFE CRUSADE INC.  
(Name of Corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

REV. TIMOTHY CHILES SR.  
(Name of Person)

BETTER LIFE CRUSADE INC.  
(Firm/Company)

P.O. Box 280254

(Address)

TAMPA, FL 33682  
(City/State and Zip Code)

For further information concerning this matter, please call:

REV. TIMOTHY CHILES SR. at (813) 746-0059  
(Name of Person) (Area Code & Daytime Telephone Number)

**MAILING ADDRESS:**  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$70.00 Filing Fee

☐ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 10, 2006

REV. TIMOTHY CHILES SR.  
BETTER LIFE CRUSADE INC.  
P.O. BOX 280254  
TAMPA, FL 33682

SUBJECT: BETTER LIFE CRUSADE INC.  
Ref. Number: W06000021728

We have received your document for BETTER LIFE CRUSADE INC.. However, the document has not been filed and is being returned for the following:

Line 2 of the application must list original state of incorporation. And the certificate must be from the state in which the corporation was first formed.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole  
Document Specialist  
New Filing Section

Letter Number: 406A00033132

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO  
CONDUCT ITS AFFAIRS IN FLORIDA**

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN  
THE STATE OF FLORIDA:

1. BETTER LIFE CRUSADE INC.  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. NEW YORK & OREGON 3. 71-08 38069  
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. AUGUST 19, 1974 5. PERPETUAL  
(Date of Incorporation) (Duration. Year corp. will cease to exist or "perpetual")
6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)
7. 9415 N. ROME CIRCLE, TAMPA FL. 33612  
(Principal office address)  
P.O. Box 280254, TAMPA FL. 33682  
(Current mailing address)
8. RELIGIOUS ORGANIZATION (CHURCH)  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: REV. TIMOTHY CHILES SR.


Office Address: 9415 N. ROME CR.

TAMPA (City), Florida 33612 (Zip Code)

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TALLAHASSEE, FLORIDA

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: REV. TIMOTHY CHILES SR.

Address: 9415 N. ROME CIRCLE

TAMPA FL. 33612

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_

Secretary: GLORIA JOHNSON-CHILES

Address: 9415 N. ROME CIRCLE

Treasurer: TAMPA FL. 33612

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Timothy Chiles Sr.  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. TIMOTHY CHILES SR.  
(Typed or printed name and capacity of person signing application)



**Office of the County Clerk**  
**Monroe County, New York**

**Cheryl Dinolfo**  
**County Clerk**

**SEARCH RESULTS**

☐ CRIMINAL/FELONY

☐ CIVIL

☒ OTHER

State of New York)  
County of Monroe) ss.  
City of Rochester)

I, Cheryl Dinolfo, Clerk of the County of Monroe, of the County Court of said County, and of the Supreme Court, both being Courts of Record, having a common seal, DO HEREBY CERTIFY:

☒ That I have made a search of the records of the Monroe County Clerk's Office from for Better Life Crusade and find the following:  
This Religious Corporation, Better Life Crusade, was filed in this office on August 19<sup>th</sup> 1974. There has not been any subsequent filings.

☐ No civil record has been found at the Monroe County Clerk's Office as of \_\_\_\_\_ for \_\_\_\_\_

☐ No felony record has been found at the Monroe County Clerk's Office as of \_\_\_\_\_

Please check with the local jurisdictions and with the Rochester City Court regarding the disposition in question.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of said County and Courts, at Rochester, New York, this 16<sup>th</sup> day of May, 2006

  
Cheryl Dinolfo  
Monroe County Clerk

CERTIFICATE

# State of Oregon

OFFICE OF THE SECRETARY OF STATE  
Corporation Division

I, **BILL BRADBURY**, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

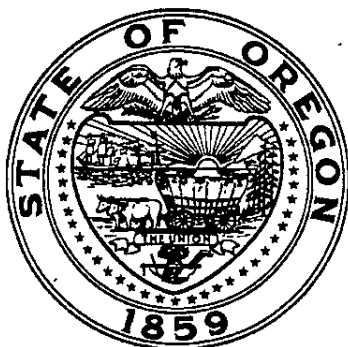
**BETTER LIFE CRUSADE**

a Nonprofit Corporation,  
incorporated under the laws of  
**New York**

was authorized to transact business in Oregon on

**November 18, 1997**

and is active on the records of the Corporation Division as  
of the date of this certificate.



In Testimony Whereof, I have hereunto set  
my hand and affixed hereto the Seal of the  
State of Oregon.

**BILL BRADBURY**, Secretary of State

By

*Marilyn R. Smith*

Marilyn R. Smith

April 26, 2006