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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1/1/1

## COVER LETTER

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

**SUBJECT:** LIFELINE MINISTRIES, INCORPORATED  
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", or "Certificate of Status" 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:

Jaimon Perry

Name of Person

The Perry Law Group LLC

Firm/Company

37 North Orange Avenue, Suite 500

Address

Orlando, FL 32801

City/State and Zip Code

jperry@perrylawfla.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jaimon Perry

Name of Person

at ( 407 )

323-2121

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

**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. LIFELINE MINISTRIES, INCORPORATED

(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.)

LIFELINE MINISTRIES OF ORLANDO, INC.

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Connecticut

(State or country under the law of which it is incorporated)

3. 06-1411992

(FEL number, if applicable)

4. 7/22/94

(Date of Incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. 1/1/15

(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)

7. 1717 Harrell Road, Orlando, FL 32825

(Principal office address)

1717 Harrell Road, Orlando, FL 32825

(Current mailing address)

8. Religious

(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: Jaimon H. Perry

Office Address: 37 North Orange Avenue, Suite 500

Orlando

(City)

Florida

32801

(Zip Code)

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.

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TALLAHASSEE, FLORIDA

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12. Names and addresses of officers and/or directors

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**A. DIRECTORS**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Chairman: Reed Calaway

Address: 13697 Crystal River Drive

Orlando, FL 32828

Vice Chairman: Mary Calaway

Address: 13697 Crystal River Drive

Orlando, FL 32828

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

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

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

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

**B. OFFICERS**

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

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

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

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

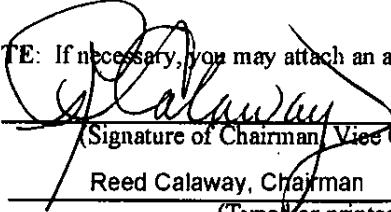
Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

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

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

14. Reed Calaway, Chairman  
(Typed or printed name and capacity of person signing application)

Office of the Secretary of the State of Connecticut

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AND  
FILED

I, the Connecticut Secretary of the State, and keeper of the seal thereof,  
DO HEREBY CERTIFY, that the certificate of incorporation of

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LIFELINE MINISTRIES, INCORPORATED

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

a domestic NONSTOCK corporation, was filed in this office on July 22, 1994, a certificate of  
dissolution has not been filed, and so far as indicated by the records of this office such corporation is in  
existence.



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Secretary of the State

Date Issued: January 28, 2015