

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 JAN 30 AM 9:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F97000003688

1. Corporation Name

Jesus Christ Is Lord & Savior Ministries,
Inc.

REINSTATEMENT 00-02

500010158875

01/16/03--01049--008 **280.00

500010158875

01/16/03--01049--009 **140.00

2. Principal Office Address

101 E. Altamonte Dr.

Suite, Apt. #, etc.

#1433

3. Mailing Office Address

PO Box 954149

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

July 16, 1997

5. FEI Number

31-1365007

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

City & State

Altamonte Springs, FL

City & State

Lake Mary, FL

Zip

32701

Country

Seminole

Zip

32795

Country

Seminole

7. Name and Address of Current Registered Agent

Name

Jonathan M. Rice

Street Address (P.O. Box Number is Not Acceptable)

101 E. Altamonte Dr.

Suite, Apt. #, Etc.

#1433

City

Altamonte Springs

State

FL

Zip Code

32701

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

Jonathan M. Rice
REGISTERED AGENT MUST SIGN

Date

1.13.03

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= President	Jonathan M. Rice (D)	101 E. Altamonte Dr. #1433	Altamonte Springs, FL 32701
V= Vice Pres.	Randall Hall-Walker (D)	15-15 W. 5th St.	Sanford, FL 32771
S= Secret.	Craig D. Ewers (D)	101 E. Altamonte Dr. #623	Altamonte Springs, FL 32701
	3 Directors		

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:

Jonathan M. Rice
Jonathan M. Rice

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1.13.03

Date

407-948-4068

Daytime Phone #

CR2E081 (10/02)

2/1/31