PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

REINS	PORATION STATEMENT	Secretal DIVISION OF 0	TMENT OF STATE ry of State corporations		FILED 04 JUL 23 PM 12: 51	
DOCUMENT, # NO 1 00000 3432 1. Corporation Name					SECRETARY OF STATE TALLAHASSEE, FLORIDA	
PROISE labernacle fellowship Church INC.				37700AA		Ú
2. Principal Office Address 768 Buffalo RD Suite, Apt. #, etc. 3. Mailing Office 768 F Suite, Apt. #, etc.			Falo Ro.	HEIL VE	TATEMENT 02-0	=4
N/A N/A.					orated or Qualified ness in Florida 5/10/2091	
City & State	ovilla Fl	City & State 7, 708 Ville	· El.	5. FEI Numbe	r VApplied For	1
327	1910 U.S.A.	32796	Country U.S.A.	6. CERTIFICATE	Not Applicable OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent						
	Street Address (F.O. Box Number is M. 168 Buffa (C. Suite, Apt.: #, Etc. N/A. City 2005)	To Nes ot Acceptable)		07/23	10039445546 70401009001 **183.75 State Zip Code FL 32796	
8. 1, 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 1-20-09 REGISTERED AGENT MUST SIGN						
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 Eac Officer and/or Directo		City / State / Zip	
DP	Jerry L. Jones	76	B Buffa(o	Rd.	Titusville, 4.32796	<u>,</u>
DVT	HARRY COBB	1.0:	42 Albin	SZ	COCOA, 46.32927	
63	Mortica Leu	DIS 110	17 FIRSZ M	Ave.	Titusville 4. 32780	1
۵	3VONda Cob	b 10%	42 AlbiN	SZ.	COCOA, 41.3292	7
5	CYNThia Mo	SeS 46	5 South 7	Robbins	Vitus VIIIe 41 32796	
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 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: SIGNATURE Date Daytime Phone #						

41 Dept of State Division of Corporations Tallahassee, 71. 32314 To whom if may Concorn:

I Bishop Toney L. Jones, registered agent for
The Praise Tabonnacle follow Soip Church, Inc. 768 Buffalo het Titusville, Fl. 32996 being the principal address, I have not recieved any renewal forms on Notices, for the Years 2002, 2003, or 2004, I called the leinstatement Sept, . I'm also askers that drug late for be warred. I am exclosing a check for the amount of 183-15 to cover our cost of Annual for. Thank You for your atkutions to this matter. Yours for Christ Sales Bishop John L Javes, I