

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

113

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 MAR 24 PM 12:42

SECRET  
TALLAHASSEE, FLORIDA

DOCUMENT # **N02000002004**

1. Corporation Name

**BYHISWORD OUTREACH MINISTRIES, INC.**

2. Principal Office Address

**8619 Bridle Path Ct**

Suite, Apt. #, etc.

City & State

**Dave FL**

Zip

**33328**

Country

**USA**

3. Mailing Office Address

**8619 Bridle Path Ct**

Suite, Apt. #, etc.

City & State

**Dave FL**

Zip

**33328**

Country

**USA**

4. Date Incorporated or Qualified  
To Do Business in Florida

**3/21/2002**

5. FEI Number

**65-1130243**

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required  
for a Certificate of Status**

**REINSTATEMENT**

**04-78**

**7. Name and Address of Current Registered Agent**

Name

**Judith Falloon-Reid**

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

**8619 Bridle Path Ct.**

Suite, Apt. #, Etc.

City

**Dave**

State

**FL**

Zip Code

**33328**

**700073757477**

**05/02/06--01063--018 \*\*183.75**

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 **3/14/06**

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 Each Officer and/or Director	City / State / Zip
P	Judith Falloon-Reid	8619 Bridle Path Ct Dave	Dave FL 33328
T	Othniel Sculley	7794 Kismet St.	Miramar FL 33023
S	Diane Osborne	8949 Palm Tree Lane	Pembroke Pines FL 33024
D	George Lopez	2401 Oleander Dr.	Miramar FL 33023
D	Tracy Marshall	8428 Long Ace Dr.	Miramar FL 33025
D	Jannette Wilson	130-48 SW 21st Street	Miramar FL 33027

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 contained in Chapter 119, 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:

**Judith Falloon-Reid**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/14/06**

Date

**EX-101 MAR 29 2006**

**954-709-9315**

Daytime Phone #

ByHisWord Outreach Ministries  
Additional Directors

Mauva Mumford  
6891 SW 28<sup>th</sup> Street, Miramar FL 33023

Joshua St. Phard  
65 SE 12<sup>th</sup> St. B2, Boca Raton, FL 33432

Raquel Reynolds  
950 NW 202 Ln, Pembroke Pines FL 33029

Tanehsa Rankine  
8619 Bridle Path Court, Davie FL 33328

Michele Gayle  
8619 Bridle Path Court, Davie FL 33328

3/3



Outreach Ministries  
8619 Bridle Path Court  
Davie FL 33328

March 16, 2006

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sirs:

Our company moved offices in 2004 and our annual report notices were never forwarded by the U.S. Postal Service to our new mailing address. We are in the process of reinstating our corporation and are requesting that the reinstatement fee be waived since the notice was never received.

Thank you.

Sincerely,

Judith Falloon-Reid  
President