PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	10 MAY 12 PM 3: 40
DOCUMENT # NO300005118		TALL
1. Corporation Name Greater Faith Christian Fellowship Inc.		
Principal Office Address - No P.O. Box #	3. Mailing Office Address	800180785868 05/12/1001037014 ***358.75
5253 Vernon Road	5253 Yernan Road	REINSTATEMENT 08-10
Suite, Apt. #, etc.	Suite, Apt. #, etc.	IIIIO I FF BISSON III
City & State	City & State	4. Date Incorporated or Qualified To Do Business in Florida 6/13/03
Jacksonville FL	Jacksonville FL	5. FEI Number Applied For Not Applicable
Zip Country .	Zip Country	6. \$8.75 Additional Fee required
32209 U.S.	32209 US	CERTIFICATE OF STATUS DESIRED for a Certificate of Status
7. Name and Address of Current Registered Agent		PROFIT CORPORATIONS ONLY
Street Address (PO Box Number is Not Acceptable)		☐ The \$600.00 reinstatement fee is imposed, except in circumstances which the entity did
Street Address (PGP Box Number is Not Acceptable) 3550 Navy 5+		not receive the prior notices. By checking this box, you are certifying the prior
Suite, Apt. #, Etc.		notices were not received and requesting the reinstatement fee be waived.
City Jacksonville, FL	State Zip Code FL 32209	the reinstatement lee be waived.
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 Subschape Date 4-23-10 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	
P/8 Brock, Billy G	S. Jr. 3550 Navy 5	+ Jacksonville FL 32209
MA Brock, Linnie	2 J. 9100 Gibson A	we tacksowille FL 32208
FS/D Johnson, Gloria	5253 Vernou R	ad Jacksonville FL 32209
D Johnson, Felica	a 5253 VernouR	load Jacksonville FL 32209
D Rayboll Ju	du 5253 Vernour	had Tacksonville FL 32209
10. E-mail Address: Dhrocks (a) amail		
(To be used for future annual report notification) 11. 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. I further certify, 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: 4-23-10		

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