PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
07 JAN 29 AM 10:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N03000008709

1. Corporation Name
TRUE WORSHIP CHURCH OF GOD IN CHRIST INCORPORATED

CR2E081 (12/05)

2. Principal Office Address	3. Mailing Office Address
13704 - NW 150 PL.	P.O. Box 777
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Alachua, Florida	City & State: Alachua, Florida
Zip: 32615 Country: Alachua	Zip: Country:

4. Date Incorporated or Qualified To Do Business in Florida: 12-2003

5. FEI Number: ☐ Applied For ☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Ernestine Perry

Street Address (P.O. Box Number is Not Acceptable): 1406 NW 230TH PL. Brooker

Suite, Apt. #, Etc.: P.O. Box 664

City: Alachua State: FL Zip Code: 32616

500081255985
07/26/06--01043--006 **61.25
300092911793
01/02/07--01054--002 **25.00

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: Ernestine Perry — Date: 10/23/06
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
Pastor	Welch, Walter L.	20818 N. SR 235	Brooker, FL 32622
T	Perry, Ernestine	P.O. Box 664	Alachua, FL 32616
T	Welch, Annie M.	P.O. Box 1281	Alachua, FL 32616
T	Ross, Alberta J	P.O. Box 2061	Alachua, FL 32616

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 any signature shall have the same legal effect as if made under oath.

SIGNATURE: Walter Welch — Walter Welch — 10/23/06 — 352-485-1965
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

K. Ecker JAN 3 1 2007