

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

09 OCT 30 PM 12:28

DOCUMENT # N04000000896

1. Corporation Name

When God Loves A Woman, Inc.

2. Principal Office Address - No P.O. Box #

528 Cheerful Street

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

City & State

Zip

33407

Country

United States

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

34-1978674

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

CR2E081 (12/08)

7. Name and Address of Current Registered Agent

Name

Pentecostal Church of God In Christ, Inc.

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

540 Cheerful Street

Suite, Apt. #, Etc.

City

West Palm Beach

State

FL

Zip Code

33407

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee 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

Janice Montgomery  
REGISTERED AGENT MUST SIGN

Date 10/26/09

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
PD	Janice Montgomery	3105 Australian Ct	West Palm Beach, FL 33407
SD	Veronica Wingate	149 W. 13th Street	Riviera Beach FL 33404
TD	Rosilyn Griffin	1345 7th Street	West Palm Beach FL 33401

REINSTATEMENT

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10/30/09--01032--002 \*\*245.00

10/30/09

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:

Janice Montgomery  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/26/09 561-283-6210  
Date Daytime Phone #