

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
FILED

08 JUL 16 AM 7:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

000133017590
07/16/08--01032--003 **245.00

7.18 JM

CR2E081 (12/07)

REINSTATEMENT
4. Date incorporated or organized
To Do Business in Florida May 6, 2004

5. FEI Number
34-1994278

Applied For
Not Applicable

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

☒ 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.

7. Name and Address of Current Registered Agent

Name
Myreon P. Latimer
Street Address (P.O. Box Number is Not Acceptable)
8026 Foxdale Drive
Suite, Apt. #, Etc.
City
Jacksonville State **FL** Zip Code **32210**

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

Myreon P. Latimer
REGISTERED AGENT MUST SIGN

Date **July 11, 2008**

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/D	Myreon P. Latimer	8026 Foxdale Drive	Jacksonville, Florida 32210
V/D	Kendra Latimer	8026 Foxdale Drive	Jacksonville, Florida 32210
D/T	Shannon Latimer	2240 Barry Drive South	Jacksonville, Florida 32208
D	Eric Hooper	7225 Crane Ave E-37	Jacksonville, Florida 32216

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:

Myreon P. Latimer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

July 11, 2008 (904) 307-5831

IRS DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
HOLTSVILLE NY 00501-0023

Age Group	Percentage
18-24	10
25-34	25
35-44	20
45-54	15
55-64	10
65-74	5
75-84	5
85-94	5
95+	5

VOICE OF HEALING MINISTRIES INC
% MYREON LATIMER
8833 OLD KINGS RD S APT 903
JACKSONVILLE FL 32257

For assistance you may call us at:
1-800-829-4933

IF YOU WRITE, ATTACH THE
STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 34-1994278. This EIN will identify your business account, tax returns, and documents even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label IRS provided. If that isn't possible, you should use your EIN and complete name and address shown above on all federal tax forms, payments and related correspondence. If this information isn't correct, please correct it using the tear off stub from this notice. Return it to us so we can correct your account. If you use any variation of your name or EIN, it may cause a delay in processing and may result in incorrect information in your account. It also could cause you to be assigned more than one EIN.

If you want to apply to receive a ruling or a determination letter recognizing your organization as tax exempt, and have not already done so, you should file Form 1023/1024, Application for Recognition of Exemption, with the IRS Ohio Key District Office. Publication 557, Tax Exempt Status for Your Organization, is available at most IRS offices and has details on how you can apply.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records.
- * Use this EIN and your name exactly as they appear above on all your federal tax forms.
- * Refer to this EIN on your tax related correspondence and documents.

Thank you for your cooperation.