

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

08 JUN 11 PM 12:57

DOCUMENT # N06000004739

1. Corporation Name

SMILEY'S TEMPLE HOUSE OF PRAYER, INC.

B 6/11/08
REINSTATEMENT 08-08

CR2E081 (12/07)

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

8517 North Palafox Street

Suite, Apt. #, etc.

3. Mailing Office Address

7951 Regiment Avenue

Suite, Apt. #, etc.

City & State

Pensacola, Florida

City & State

Pensacola, Florida

Zip

32534

Country

United States

Zip

32534

Country

United States

4. Date Incorporated or Qualified
To Do Business in Florida

April 28, 2006

5. FEI Number
593285173

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

Jerome Smiley

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

7951 Regiment Avenue

Suite, Apt. #, Etc.

City

Pensacola

State

FL

Zip Code

32534

☐ 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

Jerome Smiley Sr.
REGISTERED AGENT MUST SIGN

Date 5-21-08

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	Jerome Smiley Sr.	7951 Regiment Ave. Pensacola, FL 32534	Pensacola, FL 32534
Deacon	Johnny A. Wilson	8720 Ramble Woods Dr.	Pensacola, FL 32514
Secretary	Romielee D. Smiley	7951 Regiment Ave.	Pensacola, FL 32534

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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:

Jerome Smiley Sr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-21-08
Date

850-476-5092 Hm.
850-450-2177 Cell
Daytime Phone #