PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

09AR2

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
09 JUN -9 AM 11:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400156945794
06/09/09--01029--021 **70.00

DOCUMENT # N07000010168

1. Corporation Name
The Middle Florida + Clay County Missionary Baptist Association, union and Congress.

CR2E081 (12/07)

2. Principal Office Address - No P O Box #	3. Mailing Office Address
6631 Pine Ave.	6631 Pine Ave.
Suite, Apt. #, etc	Suite, Apt. #, etc
City & State: Flemning Island, FL	City & State: Flemning Island, FL
Zip: 32003 Country: Clay	Zip: 32003 Country: Clay

4. Date Incorporated or Qualified To Do Business in Florida: 10-02-07

5. FEI Number: 590151146 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $5.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Mathis, Gustine S.

Street Address (P O Box Number is Not Acceptable): 6605 Pine Ave

Suite, Apt. #, Etc:

City: Flemning Island State: FL Zip Code: 32003

☐ 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: Gustine S. Mathis Date: 5/26/09
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
M	Henry, Eddie Rev.	1810 Mo And St.	Orange Park, 32073
P	John J. Haymon	4420 Haymon Ave.	Penney Farms, FL 32079
P	Bradley, Mary H	1100 North St.	Green Cove Springs, 32043
P	Lewis, Lena B.	2771 Burroughs Rd	Middleburg, FL 32068
S	Payne, Florence	1861 Weston Circle	Orange Park, FL 32003
ST	Mathis Gustine S.	6605 Flemning Island	Flemning Island, 32003

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 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: Gustine S. Mathis Gustine S. Mathis 5/26/09
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #