PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

REIN	STATEMENT JMENT # N16234	S	DEPARTMENT OF ecretary of State		FILED OL MAR 16 AM IO: 27 SECOLARY OF STATE FLORIDA			
1. Corpora								
Eliza	abeth Baptist Church, Ind	corporated	I	•	REMISTATEMENT 07	-00		
2. Principal Office Address 100 South Orange Avenue P. O. Be			fice Address		en age o			
Suite, Apt. #, etc. Suite, Apt. #,				· · =	4. Date incorporated or Qualified To Do Business in Florida 08/06/1986	7		
City & State		City & State			5. FEI Number Applied For	_		
Arcad	IA FL Country	Arcadia	Country		65-0130060 Not Applica	_		
34266	USA	34265	USA		CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee requirements for a Certificate of Stati			
	7. Name and Address of Current Registered Agent Vincent A. Sica Street Address (P.O. Box Number is Not Acceptable) 40.0 - ## 51.25							
	Suite, Apt. #, Etc. Suite 101							
	City Arcadia		$\overline{\cap}$		State Zip Code FL 34266			
8. 1, being appointed the registered agent of the aboye named corporation								
8. 1, being appointed the registered agent of the aboye named obsporationem familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent 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		ch City (State / Zin			
CD	Dr. W. Paul Matthews, Jr.		100 South Orange Avenue		Arcadia FL 34266			
VCD	Collier E. Owens		6175 Gillot Boulevard		Port Charlotte FL 33981			
VCD	Richard E. Bowers, Jr.		1937 SW Hendry Street		Arcadia FL 34266			
SD	Veronica Polk		100 South Orange Avenue		Arcadia FL 34266			
ŒΤ	Darryl B. Jackson		1216 Rainbow Drive		Arcadia FL 34266			
D ´	Sharon T. Goodman		7 Owens Avenue		Arcadia FL 34266			
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 filling 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 under section 119.07(3)(i), F.S. The information indicated on this application is true afflicacurate, and my signafure shall have the same legal effect as if made under oath. SIGNATURE. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECTOR Date Daytime Phone #								

Corporation Reinstatement (Continuation)

Document # N16234

Elizabeth Baptist Church, Incorporated

Names and Street Addresses of Each Officer and/or Director (continued) 9.

Titles	Name of Officers and/or Directors	Street Address
D	Jacarrie Simons	100 South Orange Avenue Arcadia, FL 34266
D	E. Diane Fields	100 South Orange Avenue Arcadia, FL 34266