

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 NOV -5 AM 10:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N24045**

1. Corporation Name

ABUNDANT LIFE CHRISTIAN ASSEMBLY, INC.

500008782365
11/04/02--01061--014 **297.50

REINSTATEMENT 02

2. Principal Office Address

343 NE 1st Ave

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Ocala, FL.

City & State

Zip

34470

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

12/22/87

5. FEI Number

59-2890442

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

JAMES M. YOUNG, JR.

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

1925 NW 60th Ave

Suite, Apt. #, Etc.

City

Ocala

State
FL

Zip Code

34482

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

James M. Young, Jr.
REGISTERED AGENT MUST SIGN

Date **10/28/02**

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	JAMES M. YOUNG, JR.	1925 NW 60th Ave	Ocala, FL. 34482
V/D	MATTHEW GIBBS	3331 NW 2nd Ave	Ocala, FL. 34475
S/D	MARK DICKERMAN	5636 NW 49th Pl	Ocala, FL. 34482
T/D	HOWARD GREEN	44 ALMOND TRAIL	Ocala, FL. 34472

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 under section 119.07(3)(i), 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:

James M. Young, Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES M. YOUNG, JR.

10/28/02

Date

(352) 622-5515

Daytime Phone #

CR21681 (R01)

11/8/02