PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

99 JAN -4 AM 9:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N24181

1. Corporation Name

THE PILGRIMS CHURCH, INC.

Principal Place of Business	Mailing Address
13500 FRESHMAN LANE FORT MYERS FL 33912	13500 FRESHMAN LANE FORT MYERS FL 33912

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

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2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. Date Incorporated or Qualified To Do Business in Florida: 12/31/1987

5. FEI Number: 65-0015924 ☐ Applied For ☐ Not Applicable

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

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PD	~~BODSON, DOUGLAS~~ RALPH RICHARD	13500 FRESHMAN LANE	FT. MYERS FL
DV	~~SHEPPARD, JOHN~~ PATTY ORMSBY	13500 FRESHMAN LANE	FT. MYERS FL
S	~~STEPHENSON, KATIE~~ MAGGIE HUNKLER	13500 FRESHMAN LANE	FT MYERS FL
DT	~~ORMSBY, PATTY~~ SHARON THOMPSON	13500 FRESHMAN LANE	FT MYERS FL
			700002735877--2 -01/11/99--01009--015 *****61.25 *****61.25
			700002735877--2 -01/11/99--01009--016 *****175.00

8. Name and Address of Current Registered Agent

DODSON, DOUGLAS
13500 FRESHMAN LANE
FORT MYERS FL 33912

9. Name and Address of New Registered Agent

Name: MARGARET L. HUNKLER
Street Address (P.O. Box Number is Not Acceptable): 13500 Freshman Lane
Suite, Apt. #, Etc.:
City: Fort Myers State: FL Zip Code: 33912-1808

CR2E040 (9/98)

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Margaret L. Hunkler SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date: 12-30-98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. N/A Yes ☐ No ☐

(See other side for information on intangible tax.)

12. 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: SHARON M. THOMPSON TREASURER SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 11-24-98

Daytime Phone #: (941) 939-2233