

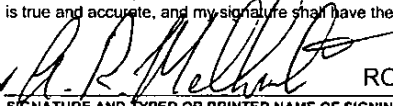


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # N28402</b> 1. Corporation Name <b>BAPTIST COMMUNICATION MISSION, INC.</b>			
2. Principal Office Address <b>3400 Raleigh Street</b>  Suite, Apt. #, etc.		3. Mailing Office Address <b>3400 Raleigh Street</b>  Suite, Apt. #, etc.	
City & State <b>Hollywood, FL</b>		City & State <b>Hollywood, FL</b>	
Zip <b>33021-3122</b>	Country <b>USA</b>	Zip <b>33021-3122</b>	Country <b>USA</b>
4. Date Incorporated or Qualified To Do Business in Florida <b>09/19/1988</b>		5. FEI Number <b>650148264</b>	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent <div style="display: flex; justify-content: space-between;"><div>Name <b>PERRY W. HODGES, JR.</b></div><div>05/24/05--01077--004 **306 25</div></div> <div style="border: 1px solid black; padding: 2px; margin-top: 2px;">Street Address (P.O. Box Number is Not Acceptable) <b>1401 East Broward Boulevard</b></div> <div style="border: 1px solid black; padding: 2px; margin-top: 2px;">Suite, Apt. #, Etc. <b>Suite 300</b></div> <div style="display: flex; justify-content: space-between; margin-top: 2px;"><div>City <b>Fort Lauderdale</b></div><div>State <b>FL</b></div><div>Zip Code <b>33301-2116</b></div></div>			
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. <div style="display: flex; justify-content: space-between; align-items: flex-end;"><div>Signature of Registered Agent  REGISTERED AGENT MUST SIGN</div><div>Date <b>May 5, 2005</b></div></div>			
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
D	BROWN, PHILIP	3400 Raleigh Street	Hollywood, FL 33021-3122
D	MELHUISH, RODNEY	3400 Raleigh Street	Hollywood, FL 33021-3122
D	SWIERENGA, JAMES	3400 Raleigh Street	Hollywood, FL 33021-3122
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:  <b>RODNEY MELHUISH</b> <span style="float: right;">5/6/05</span> <div style="display: flex; justify-content: space-between; font-size: small;"><div>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</div><div>Date</div><div>Daytime Phone # <b>954-964-2940</b></div></div>			

FILED  
05 MAY -9 PM 5:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT 04-05

CR2E081 (01/05)