


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

9600 UBR

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Walter H. Harris
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

00 MAY 30 PM 2: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N28831

1. Corporation Name **New Covenant Christian Ministries, Inc.**

2. Principal Office Address **3256 Wellington Rd.**
Suite, Apt. #, etc.

3. Mailing Office Address **3256 Wellington Rd.**
Suite, Apt. #, etc.

City & State **Pensacola, FL**

City & State **Pensacola, FL**

Zip **32504** Country **Escambia**

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4. Date Incorporated or Qualified To Do Business In Florida **10/12/1988**

5. FEI Number **59-2955490**

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

7. Name and Address of Current Registered Agent

Name **Sherrill L. Knight**

Street Address (P.O. Box Number is Not Acceptable) **2712 W. Tharpe St.**

Suite, Apt. #, Etc. **#B16**

City **Tallahassee**

State **FL** Zip Code **32303**

200003283042-2
-06/03/00-01084-005
****315.00 ****315.00

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 **Sherrill L. Knight** Date **5/30/00**

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
DP	Ross D. Knight, Jr.	3256 Wellington Rd.	Pensacola, FL 32504
VP	Sharon G. Knight	3256 Wellington Rd.	Pensacola, FL 32504
ST	Reginaid Bradley	4840 Livingston Dr.	Pensacola, FL 32504
AS	Judy Battle	3805 N. 11th Ave	Pensacola, FL 32503
D	Sherrill L. Knight	2712 W. Tharpe St #B16	Tallahassee, FL 32303
D	Bryant Pickett	8242 Emperor Rd.	Pensacola, FL 32504

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)(l), 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: **Sherrill L. Knight** Date **5/30/00** Daytime Phone # **644-6441**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CREATED (9/99)

AD

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- Robert Myles 730 Boxwood Dr. Pensacola, FL 32503

- Sandra Richardson 634 Chadwick St. Pensacola, FL 32503

- Nathaniel C. Givens 7400 Klendike Rd. Pensacola, FL 32526

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if didn't receive the 1996 notice. if ^{PARCELS} would
like the late fees waived.