PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

FILED

DOCUMENT # N33774 (3) 1. Corporation Name							97 APR 22 PM 1: 27						
NEW PROSPECT MISSIONARY BAPTIST CHURCH OF OSLO, INC.							SECRETARY OF STATE TALLAHASSEE, FLORIDA						
Principal Place of Business Mailing Address													
925 SW 9th Street P. O. Box 372 Vero Beach, FL 32962 Vero Beach, FL 32													
vero i	Beaci	1, FL 32962	vero .	Beacn	, FL	32961							
		incorrect in any way, line thro iddress, If Applicable	correction below.	Date Incorporated or Qualified									
Suite, Apt. #, etc. Suite, Apt. #,					, etc.			To Do Business in Florida 08/16/1989					
	**************************************					5. FEI Number			A	pplied For			
City & State	City & State				65-0181760 Not Applicable								
Zip Country			Zip		Country		CERTIFICATE OF STATUS DESIRED S8.79 Additional Fee to for a Certificate of St						
7. Names and S	Street Add	dresses of Each Officer and/o Name of Officers		1									
Title(s) and/or Directors			[Off	et Address of Each cer and/or Director e Post Office Box I	City / State /			Zip			
								· · · · · · · · · · · · · · · · · · ·		···-		İ	
P B	BROWN, WILLIE			310 43rd Avenue				Vero	Beach,	FL .	32968		
S D	DARRISAW, MARY ELLA				310 43rd Avenue			Vero	Beach,	FL .	32968		
T/D M	MCKINNEY, CARRIE PEARL				1155 8th Court, SW				Beach,	FL :	32962		
D W	WEBB, ALBERT				2626 20th Avenue				Beach,	FL :	32960		
D H	HAMMONS, JOHN				108 SW 6th Avenue			Vero Beach, FL 32962					
				A1/24/197									
B. Name and Address of Current Registered Agent								9. Name and Address of New Registered Agent					
Name CARF								RIE PEARL MCKINNEY P.O. Box Number is Not Acceptable) Solution 8 8 th Court, SW					
Street Ad-							ss (P.O. Box Number is Not Acceptable)					9	
Suite, Apr. #, Etc												CRZ	
Ver							Beach,	FL 32	2962	In Code		ĺ	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the o									[FL]	ip Code			
•	0			ration, am f	amiliar wit	h and accept the ol	bligations of Section	on 607.0505, F.	S.				
Signature of Registered Agen	Ca	erril Pla		Date Ar	oril 14, 1	997							
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No X **** 420 milingible ***** 542.50													
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 quality 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: Carrie Pearl Mc SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Carrie Pearl McKinney, Treasurer/Director

April 14, 1997 561-562-9356

Date

Daytime Phone #