


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

10 NOV 17 PM 3:17

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1734160

1. Corporation Name
First Church of Religious Science dba Center for Spiritual Living - Orlando
~~TRAVEL~~

2. Principal Office Address - No P.O. Box #
709 Edgewater Dr.

3. Mailing Office Address
709 Edgewater Dr.

City & State
Orlando, FL

City & State
Orlando, FL

Zip
32804

Zip
32804

800185014888
09/02/10 01033004 192.50
CR2E081 (6/10)

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number 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
Brandy Edgerly-Chabrol

Street Address (P.O. Box Number is Not Acceptable)
1523 Golden Poppy Ct.

Suite, Apt. #, Etc.

City
Orlando

State
FL

Zip Code
32824

800185014888
10/08/10--01019--010 **175.00

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 Brandy E. Chabrol Date 11/9/2010

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
President	Roscoe Brown	3620 Pelican Lane	Orlando, Florida 32803
Treasurer	Geraldine Lriefel	7521 Lovely Lane	Orlando, Florida 32810
Spiritual Leader	Brandy Chabrol	1523 Golden Poppy Ct	Orlando, Florida 32824
Secretary	Helen Joseph	615 Mariposa St.	Orlando, Florida 32803

REINSTATEMENT OF 10/13/10

10. E-mail Address: CSL_orlando@yahoo.com
(To be used for future annual report notification)

11. 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. I further certify, 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: Brandy E. Chabrol BRANDY CHABROL 11/9/2010 (407)601-1189

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #