PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 MAR 23 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N43192

1. Corporation Name

FIRST LADIES PRAYER BRUNCH OF TAMPA, INC.

700030933447
03/23/04--01068--009 **420.00

2. Principal Office Address		**3.** Mailing Office Address	
PO BOX 320844		SAME	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: TAMPA, FL		City & State	
Zip: 33679-2844	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number: 59-3143767 ☐ 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: NANCY SMITZ

Street Address (P.O. Box Number is Not Acceptable): 2501 Laurelwood lane

REINSTATEMENT 04

Suite, Apt. #, Etc.

City: Valrico | State: FL | Zip Code: 33594-5021

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: Nancy S. Smitz — Date: 03/16/2004
REGISTERED AGENT MUST SIGN

CR2E081 (01/04)

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
CHAIR	NANCY S. SMITZ	2501 LAURELWOOD LANE	VALRICO, FL 33594-5021
VC	DARBY CRADDOCK	223 LAKE LINK ROAD	WINTER HAVEN, FL 33884
SEC	TINA TRIPP	19201 VISTA LANE, C-4	INDIAN SHORES, FL 33785
TREAS	MARY E CREWS	4515 BROOKWOOD DRIVE	TAMPA, FL 33629

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: Nancy S. Smitz — 3/16/2004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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