APPROVED
AND
FILED

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

01 OCT -9 PM 4: 33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N43447

1. Corporation Name

Greater Blessings Church of God In Christ

2. Principal Office Address
1098 Paul Russell Rd

3. Mailing Office Address
Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Tallahassee, FL

City & State

4. Date Incorporated or Qualified To Do Business in Florida

Zip
32301

Country
Leon

Zip

Country

5. FEI Number
59-3096019

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
Supt. J. Dominic Franklin III

Street Address (P.O. Box Number is Not Acceptable)
1407 Wekewa Nene

300004638653--5
-10/17/01--01002--011
****472.50 ****23#.25

Suite, Apt. #, Etc.

City
Tallahassee

State
FL

Zip Code
32301

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 _____
REGISTERED AGENT MUST SIGN

Date 10/9/01

CR2E081 (9/00)

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
PD	Stella M. Stallworth	4250 Pleasant Drive	Talla FL 32301
T	J. Dominic Franklin III	1407 Wekewa Nene	Talla FL 32301
SD	Clara Stallworth	1098 Paul Russell Rd	Talla FL 32301

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: _____ J. Dominic Franklin III 10/9/01 850/922-4833
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #