PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
03 DEC 31 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000004515

1. Corporation Name

Ron Clark Ministries, Inc.

REINSTATEMENT 03

2. Principal Office Address	3. Mailing Office Address
3551 Pate Road	11266 W. Hillsborough Ave.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	#315
City & State	City & State
Zephyrhills, FL	Tampa, FL
Zip / Country	Zip / Country
33541 / U.S.	33635 / U.S.

4. Date Incorporated or Qualified To Do Business in Florida: 9/14/94

5. FEI Number: 59-3300484 ☐ 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: Ronald H. Clark

000026970920
01/14/04--01065--020 **236.25

Street Address (P.O. Box Number is Not Acceptable): 11266 W. Hillsborough Avenue

Suite, Apt. #, Etc.: #315

City: Tampa | State: FL | Zip Code: 33635

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 _____ Date DEC 12, 03

REGISTERED AGENT MUST SIGN

CR2E061 (10/02)

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	Ronald H. Clark	11266 W. Hillsborough Ave., #315	Tampa, FL 33635
DV	Belinda Clark	6850 Living Water Place	Brandon, FL 33511
DST	Michael McCord	6850 Living Water Place	Brandon, FL 33511
D	Mel Meyer	8711 Charming Knoll Court	Tampa, FL 33635

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: RONALD H. CLARK DEC 12, 03 813-966-7459

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