PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 NOV 17 PM 12:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000004649

1. Corporation Name

North River Ministries Inc.

REINSTATEMENT 99-05

CR2E081 (8/05)

2. Principal Office Address		**3.** Mailing Office Address	
215 Kay Road E		PO Box 278	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Bradenton		City & State: Bradenton	
Zip: 34208	Country: USA	Zip: 34206	Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 09/19/1994

5. FEI Number: 65-0522374 ☐ 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: R Young

Street Address (P.O. Box Number is Not Acceptable): 215 Kay Road E

800061522118
11/17/05--01048--011 **612.50

Suite, Apt. #, Etc.

City: Bradenton | State: FL | Zip Code: 34208

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: R Young — REGISTERED AGENT MUST SIGN

Date: 11/14/2005

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	R Young	215 Kay Road E	Bradenton FL 34208
VD	D Young	215 Kay Road E	Bradenton FL 34208
DS	G Haring	2950 Bravura Lake Dr.	Sarasota FL 34240
D	J Roames	2117 Worrington Ave.	Sarasota FL 34231
D	D Patton	1322 Georgetown Cir.	Sarasota FL 34232

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: R Young — RS Young 11/14/2005

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