

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

**FILED**

00 FEB 18 PM 1:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** N95000001709

**1. Corporation Name**

CenterPeace Ministries, Inc.

**2. Principal Office Address**

355 N.E. 5th Ave.

**3. Mailing Office Address**

P.O.Box 2977

**3. Suite, Apt. #, etc.**

Suite 5

**3. Suite, Apt. #, etc.**

**City & State**

Delray Beach, Fl.

**City & State**

Delray Beach, Fl.

**Zip**

33483

**Country**

Palm Beach

**Zip**

33447-2977

**Country**

Palm Beach

**4. Date Incorporated or Qualified  
To Do Business in Florida**

April 10, 1995

**5. FEI Number**

65-0568233

**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**

Catherine Hickem

**Street Address (P.O. Box Number is Not Acceptable)**

355 N.E. 5th Ave.,

**Suite, Apt. #, Etc.**

Suite 5

**City**

Delray Beach

**State**

FL

**Zip Code**

33483

**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**

*Catherine Hickem*

**Date**

Feb. 12, 2000

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
P/D	Catherine Hickem	15080 Harrison Road	Delray Beach, Fl. 33484
VP/D	W. Gordon Freeman	1200 S.W. 19th Ave.	Boca Raton, Fl. 33486
S/D	Mary Twitty	6465 Boca Circle	Boca Raton, Fl. 33433
T/D	August Brown	870 N.W. 6th Drive	Boca Raton, Fl. 33486
D	Vanessa Hewko	761 Dory Road	N. Palm Beach, Fl. 33408
D	Neil Hickem	15080 Harrison Road	Delray Beach, Fl. 33484

**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:** Catherine Hickem

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

February 12, 2000 561.279.8343

Date

Daytime Phone #

CR2E081 (9/99)