PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
12 MAY 16 PM 1:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000003234

1. Corporation Name

10th Street Church of Christ
At 157 W. 10th Street, Apopka, Florida, Inc

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
157 W 10th St.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Apopka Fl.	City & State
Zip: 32703 County: Orange	Zip: 32703 Country

CR2E081 (11/10)

4. Date Incorporated or Qualified To Do Business in Florida: 1995

5. FEI Number: ☐ Applied For ☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee (optional)

7. Name and Address of Current Registered Agent

Name: Nathan Jenkins JR

Street Address (P.O. Box Number is Not Acceptable): 1213 Marvin C. Zanders Ave.

Suite, Apt. #, Etc.:

City: Apopka FL 32703 State: FL Zip Code: 32703

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8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0305, F.S.

Signature of Registered Agent: Nathan Jenkins JR Date: 5-11-12
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
TP	Adolph Armstrong	1520 S. Highland Ave	Apopka FL 32703
P	Wilford Gregory	154 W. 10th Street	Apopka FL 32703
S.D	Nathan Jenkins	1213 Marvin C Zanders	apopka FL 32703
D	Renard McFarland	816 Royal Oak Ct	DeLand FL 32724
		REINSTATEMENT 10-12	

10. E-mail Address: 10thstchurchofchrist@earthlink.net
(To be used for future annual report notification)

11. 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., and that all fees owed by the corporation have been paid. I further certify the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath; I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE: Nathan Jenkins JR 5-11-12 407 947-7730
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MAY 16 2012

T. SCOTT