

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

192

CORPORATION REINSTATEMENT

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

DOCUMENT # **N96000002840**

1. Corporation Name
Restoration Fellowship Center, Inc.

2. Principal Office Address
4760
Suite, Apt. #, etc.
Bld D
City & State
Florida
Hauderdale Lakes
Zip
33319 Country
US

3. Mailing Office Address
4760 NW 49 Terr.
Suite, Apt. #, etc.
City & State
Florida
Hauderdale Lakes FL
Zip
33319 Country
US

FILED
02 FEB -1 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7. Name and Address of Current Registered Agent

Name
Worrell Hylton

Street Address (P.O. Box Number is Not Acceptable)
3031 NW 7th St Ft Lauderdale **700004926667-2**
Suite, Apt. #, Etc.
City
Ft Lauderdale State
FL Zip Code
33311

02/14/02-01065-020
****192.50 ****192.50

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

W Hylton

Date **Jan. 30th, 2002**

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
PD	HYLTON, WORRELL	3031 NW 7th Street	Ft Lauderdale FL 33311
VD	HYLTON, Loris Anne	3031 NW 7th St	Ft Lauderdale FL 33311
ST	Christie-Collymore, Sheryl	11 NE 16th Ct	Ft Lauderdale FL 33305
			LS
			9/9/99 90004/016 6/125

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

W Hylton

Date

Daytime Phone #

Jan. 30th, 2002

Thank You.



208

"Restoring People to God and The Word of God to People"

PASTOR

Rev. Worrell R. Hylton

FINANCE DIRECTOR

Sheryl A. Christie

ASST. FINANCE DIRECTOR

Leesa Hinds

ADMINISTRATOR

Anne Newman-Hylton

Address

4760 N. State Road 7
Lauderdale Lakes, FL 33319

Telephone

(954) 777-3777
(954) 791-6628

January 30th 2002

TO WHOM IT MAY CONCERN

This letter serves to inform you as to why RESTORATION FELLOWSHIP CENTER annual reports weren't sent in. Our record shows that on August 19th, 1999, Restoration Fellowship Center's annual report was sent to you with a check for sixty-one dollars and twenty five cents, (\$61.25). This was cashed and returned to our office.

Since then we have not received any correspondence from your office. This may be due to the fact that we have changed address. Please accept my deepest apology and I respectfully ask you to use your high office to reinstate RESTORATION FELLOWSHIP CENTER and I further ask you to wave the late fee.

Thanks for your understanding; your service is of great help to me.

Yours Truly


Worrell Hylton (President)