PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE APPLICATION Sandra B. Mortham FO'R Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 1997 DEC 10 AM 8: 57 DOCUMENT # N96000005193 SECRETARY OF STATE 1. Corporation Name TÄLLAHASSEE, FLORIDA Wind, Rain, and Fire Ministries, Inc. Principal Place of Business Mailing Address 7468 Wymart Road 7468 Wymart Road 32526 Pensacola, FL 32526 Pensacola, FL If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified
To Do Business in Florida 1309 Gloucester St. Suite, Apt. #, etc. 10/07/96 Sulte, Apt. #, etc. 5. FEI Number Applied For City & State City & State Not Applicable Brunswick, \$8.75 Additional Fee required 31520 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Name of Officers City / State / Zip Title(s) and/or Directors 20265 E. Erin Pond Road Seminole, AL 36574 John Michael Kilpatrick D, P7468 Wymart Road Pensacola, FL 32526 <u> Alison Ward</u> A. Elizabeth Ward 7468 Wymart Road Pensacola, FL 32526 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent Name 100002373941; A. Elizabeth Ward Street Address (P.O. Box Number is Not Accel 2016/97-01104-019 **₹ 7468** Wymart Road Pensacola, FL 32526 Suite, Apt. #, Etc. City State | Zip Code 10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505. F.S. Signature of Registered Agent Aships beth Wood REGIŜTERED AGENT MUST SIGN 11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. (See other side for information on intangible tax.) 12. Leaftly that Lam 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.

(912)267-1744