


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 79800000756			
1. Corporation Name NEW JERUSALEM WORSHIP MINISTRIES, INC			
2. Principal Office Address 1305 STATE ROAD 16		3. Mailing Office Address 1305 STATE ROAD 16	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State SAINT AUGUSTINE, FLORIDA		City & State SAINT AUGUSTINE, FLORIDA	
Zip 32084	Country US	Zip 32084	Country US
4. Date Incorporated or Qualified To Do Business in Florida 2/10/1998		REINSTATEMENT 03-05	
5. FEI Number 59-3466986		Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent			
Name VENESSA E. LEE			
Street Address (P.O. Box Number is Not Acceptable) 580 LIVE OAK STREET			
Suite, Apt. #, Etc.			
City ST. AUGUSTINE		State FL	Zip Code 32084
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 <i>Venessa E. Lee</i>		Date MAY 11, 2005	
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
Pastor	James V. Lee	580 Live Oak Street	St. Augustine, FL 32084
Asst Pastor	Venessa E. Lee	580 Live Oak Street	St. Augustine, FL 32084
Deacon	Christine Byrd	13 Travis Lane	St. Augustine, FL 32084
Deacon	Roosevelt Byrd	13 Travis Lane	St. Augustine, FL 32084
Minister	Nathaniel Hankins	132 Lincoln Street	St. Augustine, FL 32084
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: <i>Venessa E. Lee</i>		Venessa E. Lee	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date May 11, 2005	Daytime Phone # (904) 819-7634

CR2001 (01/05)

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NEW JERUSALEM WORSHIP MINISTRIES

May 11, 2005

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

Dear Sir or Madam:

I am submitting this letter in behalf of reinstating our corporation. I am requesting that our reinstatement penalties be waived due to not receiving the letter from your office. Somehow the paper work to renew was lost in the mail and it was not forward to our new address. The administrator of our church in the past has been gone for 3 years now and we were not aware of sending in the corporation requirements before our status was changed to inactive.

Upon going to the bank to open a new account made us aware that our status was inactive. Please find enclosed our Corporation Reinstatement application along with a check for \$192.50.

If further information is needed, please feel free to contact me at (904) 819-7634 or (904) 810-5110.

Sincerely,



Venessa E. Lee
Co-Pastor/Administrator

cc:
Rev. James V. Lee