

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

2011 SEP 22 PM 3:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N98000003464**

1. Corporation Name

Hope of the World Christian Center Ministries, Inc.

2. Principal Office Address - No P.O. Box #

7763 Ramona Street

3. Mailing Office Address

7763 Ramona Street

City & State

Miramar, Florida

Zip

33025

Country

Broward USA

Zip

33025

City

Broward USA

6. CERTIFICATE OF STATUS DESIRED ☒

For a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Jermeth Fothergill

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

7763 Ramona Street

Suite, Apt. #, Etc.

City

Miramar

State

FL

Zip Code

33025

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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

*S. A. Fothergill*

Date 02/24/2010

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
PRE	Jermeth Fothergill	7763 Ramona Street	Miramar, Florida 33025
SEC	Edlyne Thelusma	451 SW 113 Way Unit 12-451	Pembroke Pines, Florida 33025
D	Pearl Tyson	13290 N.W. 6TH PLACE	Plantation, Florida 33325
TRE	Hilda Archer	5431 SW 22 Street	Hollywood, Florida 33023
REINSTATEMENT 04-16			

10. E-mail Address: jangelafothergill@gmail.com

(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., 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.

SIGNATURE: *S. A. Fothergill* Jermeth Fothergill

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/24/2010 954-548-9988

Date

Daytime Phone #