10/2 La

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	RPORATION STATEMENT		Se	DEPARTMEN DECRETARY OF S		E	03 OCT -9 PI SECRETARY OF TALLAHASSEE			
DOCUMENT # N9800006192							TALLAHASSEE	FLORIDA		
1. Corporation Name Beginning Again Ministries, Incorporated						CO. Province Provinc	in the state of th			
2. Principal Office Address 205 Moyfair Lay Suite, Apt. #, etc. 4. 0.14				X 965	•		00023667 09/0301049029	(D15 5 **306.25	1	
City & State City & State City & State City & State				lle Fl	À		siness in Florida. 10/06	7/1998 Applied For-		
327C	Countr	ISA.	32781	Coun		6. CERTIFICAT	E OF STATUS DESIRED (D) \$8.7	Not Applicable 5 Additional Fee required ra Certificate of Status		
	Name Not the Robert Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. # City THSY//R State Zip Code FL 32190									
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obj							ion 607.0505 or 617.0503, F.S.	3	CR2E081 (10/02)	
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least							· · · · · · · · · · · · · · · · · · ·			
Titles	Name of Officers and/or Directors			· C	treet Address of I	ector	City / State	a / Zip		
Pre.	Robert L. Merritt			2200 1	rriayta	ir Way#1	Titusville Fi	32796		
V. Pre.	. Pre James 1. Bryant			1905 []	#211	way	1. husville, F	1_32196	-	
Sec. Kelly Bryant			12	2205 Moyfair Way			Titusville, Fl 32196			
Irea.	Yvonne £	E. Merr	itt /	1.200 M	laufair	way	Titusville, F	32796		
				<u>, </u>						
this rein owed by	nstatement application, y the corporation have application is true and	the reason for dissi been paid and the i	olution has been e names of individua	liminated, the cor Is listed on this fo	porate name satis orm do not qualify	sfies the requirements for an exemption und	apter 607 or 617, F.S. I further of sof section 607.0401 or 617 040 der section 119.07(3)(i), F.S. The	1. F.S., that all fees		