PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. RIFA DEPARTMENT OF STATE Katherine Harris FILED Secretary of State REINSTA IVISION OF CORPORATIONS 00 OCT 16 PM 2: 06 N99000001121 DOCUMENT # 1. Corporation Name SECRETARY OF STATE TALLAHASSEE, FLORIDA THE COMMUNITY PRAYER CHAPEL, INC. Principal Place of Business Mailing Address 4901 FOREST CREEK DRIVE 4900 FOREST CREEK DRIVE PACE FL 32571 PACE FL 32571 If above addresses are incorrect in any way, line through incorrect information and enter correction below. Date Incorporated or Qualified To Do Business in Florida 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 02/19/1999 Suite, Apt. #, etc. Suite, Apt. #, etc. 5.- FEI Number -Applied For City & State City & State Not Applicable \$8.75 Additional Fee required Country Zip Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each and/or Directors Officer and/or Director City / State / Zip Title(s) 4900 FOREST CREEK DRIVE **PACE FL 32571** PD SUMPALL, KENNETH I POST OFFICE BOX 450-MARIANNA FL 32447 **VPD** HOLLIS; JACK 823 LAVON DR PETERS, WILLIAM PENSACOLA, FL 32506 3843-LEGEND-CREEK-DRIVE-PAGE FL 32571-STD MEANS, MARLENE S MILTON FL 32570 5130 SAINTS LANE PENSACOLA FL 32506 D 205 N. 59TH AVENUE WEAVER, WESLEY J **PACE FL 32571** D SUMRALL, STANLEY M 4542 SANTA VILLA DRIVE 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name SUMPALL, KENNETH I Street Address (P.O. Box Number is Not Acceptable) 4900 FOREST CREEK DRIVE Suite, Apt. #, Etc. **PACE FL 32571** State | Zip Code City 10. I, being appointed the registered agept of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent Date __/0-/3-00 ISTERED AGENT MUST SIGN 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 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.

10-13-00 850-995-9809

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

<u>Burrish din seledi</u>

2012

COMMUNITY PRAYER CHAPEL

4901 Forest Creek Drive Pace, Florida 32570

October 13, 2000

To Whom it May Concern,

The corrections requested were sent to you in August. I am not sure why you did not receive them. Enclosed is another correction form with changes for the Community Prayer Chapel Charter. Thank you for making these changes and informing us of our status.

Sincerely,

Ken Sumrall, President Community Prayer Chapel

Pace, Florida

Phone: 850-995-9809 Fax: 850-994-2686