PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. ELORIDA DEPARTMENT OF STATE Katherine Harris FILED CRETARY OF STATE Secretary of State DIVISION OF CORPORATIONS 00 OCT 27 AM 10: 35 N99000001183 DOCUMENT # 1. Corporation Name HIGHER PRAISE CATHEDRAL INC. Mailing Address Principal Place of Business 644 DORAL LANE 644 DORAL LANE MELBOURNE FL 32940 MELBOURNE FL 32940 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 3. New Mailing Office Address, If Applicable 2. New Principal Office Address, If Applicable 02/22/1999 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State Not Applicable \$8,75 Additional Fee required Zip Country Country Zip CERTIFICATE OF STATUS DESIRED for a Certificate of Status 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Name of Officers City / State / Zip Officer and/or Director and/or Directors Title(s) **MELBOURNE FL 32940** ۷D GILMORE, STEVIE 644 DORAL LANE **MELBOURNE FL 32940** 644 DORAL LANE PD GILMORE, JENNIFER L DAYTONA FL CD ENGLISH, JAMES 110 DIVISION STREET STD FLUELLEN, SHIRLEY **627 EAST WALKER STREET** MELBOURNE FL 32901 **MELBOURNE FL 32905 1086 MASTER STREET** D ENGLISH, MARY 07-13-00 90014 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent Name GILMORE, JENNIFER Street Address (P.O. Box Number is Not Acceptable) 644 DORAL LANE Suite, Apt. #, Etc. **MELBOURNE FL 32940** Zip Code City State 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. **e**(€3) (. = 2 Signature of Registered Agent 1/1/16 REGISTERED 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 filling

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.

\_\_\_\_

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/23/00

301-253-2849

0018927

## TO WHOM IT MAY CONCERN:

THIS LETTER IS REGARDING REINSTATEMENT OF HIGHER PRAISE CATHEDRAL INC. DOC.#N99000001183. I WAS TOLD TO FAX BACK MY PAPER WITH THE CORRECTION OF THE FEI NUMBER AND I DID JUST THAT. WHEN I CALLED BACK THEY SAID THAT HIGHER PRAISE CATHEDRAL WAS ON FILE. I WOULD APPRECIATE IF YOU COULD WAIVE THIS FEE OF REINSTATEMENT. I DID THE NESSARY THINGS TO INSURE THAT HIGHER PRAIDE CATHEDRAL IS FILED.

SINCERELY,

JENNIFER GILMORE

321-253-2849