

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 05 SEP 30 AM 10:24 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # <u>N990000002066</u>					
1. Corporation Name <u>Greater Prayer Temple outreach ministries INC</u>					
2. Principal Office Address <u>330 N. Pine St</u>			3. Mailing Office Address <u>Po Box 1420</u>		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State <u>Bronson FL</u>			City & State <u>Bronson FL</u>		
Zip <u>32621</u>	Country <u>USA</u>	Zip <u>32621</u>	Country <u>USA</u>	4. Date Incorporated or Qualified To Do Business in Florida <u>N/A</u>	
5. FEI Number <u>59-3421985</u>				Applied For ☐ Not Applicable	
6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status					

7. Name and Address of Current Registered Agent	
Name <u>Lewis B. Nelson</u>	200041973212
Street Address (P.O. Box Number is Not Acceptable) <u>16831 S.W. Archer Rd</u>	09/30/05--01006--001 **61.15
Suite, Apt. #, Etc.	
City <u>Archer</u>	State <u>FL</u>
	Zip Code <u>32618</u>

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

[Signature]

REGISTERED AGENT MUST SIGN

Date July 20 05

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
T	Roosevelt woodley	513 E. main st	Bronson FL 32621
D	Reginald NATTIE	685 NW 258th St.	Newberry FL 32669
D	Sylvester Smith	17296 SW 128th Pl.	Archer FL 32618
D	Arthur Mathis	286 Dunn St	Bronson FL 32621

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roosevelt Woodley Roosevelt Woodley July 20-05

Date Daytime Phone #

CR2E081 (01/05)