


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

03 APR -8 AM 9:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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04/11/03--01004--004 \*\*122.50

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT #</b> <i>N99000003354</i>			
<b>1. Corporation Name</b> <i>New Freedom Ministries, Inc.</i>			
<b>2. Principal Office Address</b> <i>15798 SW Warfield Blvd.</i> Suite, Apt. #, etc.		<b>3. Mailing Office Address</b> <i>P.O. Box 664</i> Suite, Apt. #, etc.	
<b>City &amp; State</b> <i>Indiantown, FL</i>		<b>City &amp; State</b> <i>Indiantown, FL</i>	
<b>Zip</b> <i>34956</i>	<b>Country</b> <i>USA</i>	<b>Zip</b> <i>34956</i>	<b>Country</b> <i>USA</i>

<b>4. Date Incorporated or Qualified To Do Business in Florida</b>	
<b>5. FEI Number</b> <i>65-0924254</i>	<b>Applied For</b> <input type="checkbox"/> <b>Not Applicable</b>
<b>6. CERTIFICATE OF STATUS DESIRED</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee required for a Certificate of Status</b>	

<b>7. Name and Address of Current Registered Agent</b>		
<b>Name</b> <i>James Crosby</i>		
<b>Street Address (P.O. Box Number is Not Acceptable)</b> <i>15806 SW 151<sup>st</sup> St.</i>		
<b>Suite, Apt. #, Etc.</b>		
<b>City</b> <i>Indiantown</i>	<b>State</b> <i>FL</i>	<b>Zip Code</b> <i>34956</i>

**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** *James C Crosby* **REGISTERED AGENT MUST SIGN**

**Date** *4/4/03*

**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
D	James Crosby	15806 SW 151 <sup>st</sup> St	Indiantown, FL 34956
DT	Linda Crosby	15806 SW 151 <sup>st</sup> St	Indiantown, FL 34956
DS	Susan Martinez	11500 SW Kanner Hwy. #226	Indiantown, FL 34956

**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:**

*Linda J Crosby / Linda Jo Crosby*

*4/4/03*

*722-597-5306*

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**Date**

**Daytime Phone #**

CR2E081 (10/02)

*21 418*

## **NEW FREEDOM MINISTRIES**

**15798 SW Warfield Blvd.**

**P.O. Box 664**

**Indiantown, FL 34956**

**April 4, 2003**

**To Whom It May Concern:**

During the time that we should have been renewing our corporation papers, we were in the process of moving our home and office. Although, I put in a change of address to have our mail forwarded to us by the Post Office, I forgot to send you a change of address. I did not receive the renewal notice or the reminder notice that your office said was sent. We have quite a few problems with our mail here and lost quite a bit of it in the process of moving. The Post Office offers no explanation for that problem. I am asking for a waiver of the \$175 re-instatement fee. I am enclosing the \$122.50 that I was told I needed to send. I hope this covers everything and look forward to hearing from you, if you need any more information.

**Thank you for your kind consideration.**

**Sincerely,**

**Linda Crosby, Treasurer**