

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N99000003732

1. Corporation Name

JESUS CHRIST Church of LOVE,
GRACE AND MERCY INC.

2. Principal Office Address

23075 Jacobson Rd
Suite, Apt. #, etc. NA

3. Mailing Office Address

10274 Morning Star Ave
Suite, Apt. #, etc.

4. Date Incorporated or Qualified To Do Business in Florida

(now)

5. FEI Number

593569881

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

SR.75 Additional Fee required for a Certificate of Status

City & State

Brooksville FL

City & State

Brooksville FL

Zip

34601

Country

Hernando

Zip

34601

Country

Hernando

7. Name and Address of Current Registered Agent

Name Bishop

Henry C Monroe

Street Address P.O. Box Number is Not Acceptable

10274 Morning Star Ave

Suite, Apt. #, Etc.

NA

City

Brooksville

900055988439

06/10/05--01002--009 **8.75

900055988439

06/10/05--01002--010 **481.25

State

FL

Zip Code

34601

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

Henry C Monroe

REGISTERED AGENT MUST SIGN

Date

May 2, 2005

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
<u>PO</u>	<u>Henry C. Monroe</u>	<u>10274 Morning Star Ave</u>	<u>Brooksville FL 34601</u>
<u>V.P.</u>	<u>Sandra Monroe</u>	<u>10274 Morning Star Ave</u>	<u>Brooksville FL 34601</u>
<u>DT</u>	<u>Eva Mobley</u>	<u>23075 Jacobson Rd</u>	<u>Brooksville FL 34601</u>
<u>Tf</u>	<u>Ruben Mobley</u>	<u>23075 Jacobson Rd</u>	<u>Brooksville FL 34601</u>
<u>BT</u>	<u>Angela Sheppard</u>	<u>23075 Jacobson Rd</u>	<u>Brooksville FL 34601</u>

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:

Henry C Monroe HENRY C. MONROE

Date

MAY 2, 2005

Daytime Phone #

352-540-6178

CR2E081 (01/05)