

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

112

**CORPORATION
REINSTATEMENT**



**FLORIDA DEPARTMENT OF
STATE**
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N99000003886

Corporation Name
CHURCH OF LIVING GOD GATEWAY TO HEAVEN, INC.

FILED

2005 NOV 14 PM 12:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E081 (8/05)

| | | | |
|---|--------------------------|---|--------------------------|
| 2. Principal Office Address 18310 DOLLY BROOK LANE | | 3. Mailing Office Address 18310 DOLLY BROOK LANE | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | |
| City & State LUTZ, FLORIDA | | City & State LUTZ, FLORIDA | |
| Zip 33549-5858 | Country UNITED STATES | Zip 33549-5858 | Country UNITED STATES |

REINSTATEMENT

00-05

| | |
|--|---|
| 4. Date Incorporated or Qualified To Do Business in Florida 06/21/1999 | 5. FEI Number 31-1662818 Not Applicable Applied For |
| 6. CERTIFICATE OF STATUS DESIRED | |

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name WOODBURY, RICHARD L

Street Address (P.O. Box Number is Not Acceptable) 3905 EAST CHELSEA STREET

Suite, Apt. #, Etc.

City TAMPA

500061486675
11/16/05--01050--022 **542.5

State Zip Code
FL 33610

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 *Richard L. Woodbury* Date 11-10-05
REGISTERED AGENT MUST SIGN

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 | RUBY BAKER | 18310 DOLLY BROOK LANE | LUTZ, FLORIDA 33549-5858 |
| D | LOLA BARNHILL | 5815 EAST 30 TH STREET | TAMPA, FLORIDA 33619 |
| D | ELAINE ROLLINS | 1902 ST JOHN STREET | TAMPA, FLORIDA 33607 |
| S | MARGARET BAKER | 8529 TIDEWATER TRAIL | TAMPA, FLORIDA 33619 |
| T | MALACHI BAKER | 8529 TIDEWATER TRAIL | TAMPA, FLORIDA 33619 |
| T | MONROE BAKER | 1915 EAST ELLICOTT STREET | TAMPA, FLORIDA 33610 |

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 11 9.07(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: *Ruby Baker*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/10/05 813,949-8119
Date Daytime Phone #

Ruby Baker

11/1502

| 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) | | | |
|---|--------------|--|----------------------|
| Titles | | City / State / Zip | |
| Name of Officers and/or Directors | | Street Address of Each Officer and/or Director | |
| T | FANNIE YOUNG | 6202 38 TH STREET | TAMPA, FLORIDA 33610 |