	PLEASE READ	ALL INST	RUCTI	ONS	BEFORE C	OMPLETI	NG THIS FO	RM.	<b>a</b> .
APE	PLICATION FOR STATEMENA STATEMENA	FLORIDA		RTMEN ine Ha ry of S	NT OF STATE I <b>rris</b> tate		FILEE DEUMETARY O MISTON OF COR		Ø
DOCUMENT # N9900007300  1. Corporation Name						00 0CT 25 PM 5: 26			
ALL PE	EOPLE CHURCH OF G	OD, INC.			·				
4564 TREN	ace of Business TON DR. ILLE FL 32209	4564 TRENT	Mailing Address  4564 TRENTON DR.  JACKSONVILLE FL 32209						
			rect information and enter correction below.  Mailing Office Address, If Applicable  opt. #, etc.			04-07-00 90036 049 \$ 62.25  4. Date Incorporated or Qualified To Do Business in Florida 12/13/1999.			
City & State		City & State				5. FEI Number Applied For Not Applicable			
Zip	Country	Zip Cou			<del>,</del>	CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status			
7 Names a	nd Street Addresses of Each Officer and	Vor Director (Flo	rida nonnrofi	corpora	tions must list at lea	st 3 directors)			
T, Teamloo u	Name of Officers				et Address of Each			<del></del>	
Title(s) and/or Directors					icer and/or Director		) ^ C	ity / State / Zip	}
P/0	Paul Green 4564 Trenton Dr. Joxy F1 32209 456			4564 Trenton D.S. Jax, F132				chrowille, F13	32209
<b>V/</b> <i>V</i>	VID Althen Green, Ophelin			4564 Trenton Dr.					
T	Louise Henry	205 E. 44thst.			Jacksonville, Fl 32218				
5 Towned Brown			39120			Dinton Dr.		Jacksonville, Fl 3220	
					<u> </u>				
_,	8. Name and Address of Curren	Registered Age	ent			9. Name and A	ddress of New Regis	tered Agent	
Name 17						1 /			
GREEN, PAUL Street Address						W/ Otech			
4564 TRENTON DR.					Street Address (P.O. Box Number is Not Acceptable)				
JACKSONVILLE FL 32209					Suite, Apt. #, Etc.	<u> </u>	ENTON VII		
10. I, being appointed the registered agent of the above named corporation, am familiar with					City Tack	sonville	607 0505 F.O.	FL Zip Code 3226	19
10. I, being	appointed the registered agent of the ab	ove named corpo	oration, am fa	amular wi	n and accept the ol	oligations of Section	on 607.0505, F.S.	1	}
Signature of Registered A	Agent /	REGISTERED AG	ENT MUST	SIGN	別認定的	- <u></u> -	Date 10/3	13/2000	<u> </u>
					this application to a	rouided for in abo	ntor 607 or 617 E.S. I	further certify that who	n filing

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daylime Phone #

October 20, 2000

Elder Paul Green 4564 Trenton Dr. S Jacksonville, FL 32209

State of Florida /Dept. of State Division of Corporations Annual Report/ Reinstatement Section

RE: Notice of Administrative Dissolution

To Katherine Harris or whom it may concern,

On the first draft of the application, I didn't understand all of what you were requiring of me to fill in; therefore I didn't answer some of the spaces. Please accept my apology for this oversight and misunderstanding. Also, thank you for allowing me to reinstate my church charter. I am submitting the application for reinstatement and I hope that this time, you will find everything in order. Feel free to contact me if there are any problems.

Thank you,

**ELDER Paul Green** 

Pastor, All People Church Of God, Inc.

Elder part free

HELEN DELORIS HARDY
My Comm Exp. 2/1/2002
No. CC 712797

Personally Known {}Other I.