

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 JAN 11 PM 1:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P12556

1. Corporation Name

Air Mobile Ministries

1427 Chaffee Drive

1427 Chaffee Drive

2. Principal Office Address
1427 Chaffee Drive

3. Mailing Office Address
1427 Chaffee Drive

Suite, Apt. #, etc.

Suite 5

Suite, Apt. #, etc.

Suite 5

City & State

Titusville, FL

City & State

Titusville, FL

Zip

32780

Country

USA

Zip

32780

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida 12/16/1986

5. FEI Number
72-0992001

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

Joseph R. Hurston

Street Address (P.O. Box Number is Not Acceptable)

5560 Fan Palm

Suite, Apt. #, Etc.

City

Cocoa

State

FL

Zip Code

32927

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

REGISTERED AGENT MUST SIGN

Date

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 |
|--------|--------------------------------------|---|--------------------------|
| PD | Joseph R. Hurston | 5560 Fan Palm | Cocoa, FL 32927 |
| STD | Richard Bostrom | 3361 Biscayne Drive | Merritt Island, FL 32953 |
| D | Cindy Hurston | 5560 Fan Palm | Cocoa, FL 32927 |
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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

Date

Daytime Phone #



AIR MOBILE MINISTRIES
www.airmobile.org

January 7, 2005

Department of State
Divisions of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FEI Number: 720992001
Document Number: P12556
Status: Inactive
Date filed: 12/16/1986
Event Date Filed 10/16/1998

Dear Sir or Madam:

This letter is to transmit the Air Mobile Ministries reinstatement fees to reinstate our nonprofit incorporation.

Attached is a check (Number 566) in the amount of \$490.00. This amount includes all annual report fees from the last time we submitted our annual report, July 18, 1997. This amount does not include the reinstatement fee of \$175.00. We are requesting that you waive this fee because we never received our state renewal notification.

Please contact the undersigned if you have any questions regarding our reinstatement filing.

Joseph R. Hurston
President / CEO

Air Mobile Ministries
1427 Chaffee Drive, Suite 5 ~ Titusville, Florida 32780
Office: 321-267-7726 ~ Fax: 321-267-7353