PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FÖR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P93000047711

1. Corporation Name

SIGNATURE:

DIVERSIFIED CHRISTIAN INVESTMENTS CORPORATION

FILED 97 FFB 14 PM 12: 34

FEBRUARY 10, 1997 407-330-2939

MUNETALT OF STATE TALLAHASBEE, FLORIDA Mailing Address Principal Place of Business P.O. BOX 580045 406 E. OHIO AVENUE ORLANDO FL 32858-0045 DELAND FL 32724 If above addresses are incorrect in any way, line through incorrect information and enter correction below 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 07/01/1993 Suite, Apt. #, etc. Suite, Apt. #, etc. , 5. FEI Number Applied For 59-3192954 City & State City & State Not Applicable \$8.75 Additional Fee required for a Certificate of Status Zip Country Zin Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Name of Officers City / State / Zip Title(s) ORLANDO FL 32805 CARTER, VINCENT L 3130 MARTINIQUE WAY D PERRY BODKER T. 2040 ROGER ST. MAITLAND, FL. 32751 D 7600 POMELO DRIVE **GREANDO FE-02019** 7207 PLEASANT DRIVE ORLANDO, FL. 32818 D GUM FRAISER CHARLES 3978 MCDONOUGH AVENUE ORLANDO FL 32809 D HAYSLIP, AUBREY APOPKA FL 32703 1939 TINDARD DRIVE D **BOATMAN, HOLLICE** 4800 ANZIO STREET **CLAYTON: JANICE** OFILANDO FL 32819 D Mc*Tear James* crawpord, Jayne Clayton DRLANDO, FL. 32812 1721 ADDIE AVE 26 LINCOLN AVENUE Đ McKenzie, Karl 7507 COVEDALE DRIVE E)RLANDO.PL. 328/8 D 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent CARTER, VINCENT L Street Address (P.O. Box Number is Not Acceptable) 406 E. OHIO AVENUE 100002089911 **DELAND FL 32724** Suite, Apt. #, Etc. -02/17/97--01157--009 ****306.35。****306.25 City named dorporation, am familiar with and accept the obligations of Section 607.0505, F.S. registered agent of the abov 10. I, being appointed the Signature of Registered Agent REGISTERED AGENT MUST SIGN 11: Does this corporation pay any intangible tax to the (See other side for information on intangible tax.) Dept. of Revenue under S. 199.032, Florida Statutes. 12. Licertify 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 filling this reinstalement 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.