



DATE:	DOCUMENT ID	DESCRIPTION	FILING	EXPED	PENALTY	CERT	COPY
07/07/2003	200318402116	DOMESTIC/REINSTATEMENT (REN)	25.00	.00	.00	.00	.00

Receipt

This is not a bill. Please do not remit payment.

NEWCOMERS CHAPEL OF PIGEON RUN UMC
11789 SARBAUGH AVENUE, S.W.
MASSILLON, OH 44647

STATE OF OHIO**Ohio Secretary of State, J. Kenneth Blackwell****305429**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

PIGEON RUN UNITED METHODIST CHURCH

and, that said business records show the filing and recording of:

Document(s)

DOMESTIC/REINSTATEMENT

Document No(s):

200318402116

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of
the Secretary of State at Columbus,
Ohio this 3rd day of July, A.D.
2003.

J. Kenneth Blackwell
Ohio Secretary of State



Prescribed by **J. Kenneth Blackwell**

Ohio Secretary of State
Central Ohio: (614) 466-3910
Toll Free: 1-877-SOS-FILE (1-877-767-3453)

www.state.oh.us/sos

e-mail: busserv@sos.state.oh.us

Expedite this Form: (Select One)

Mail Form to one of the Following:

☐ Yes PO Box 1390
Columbus, OH 43216
*** Requires an additional fee of \$100 ***
☒ No PO Box 788
Columbus, OH 43216

REINSTATEMENT

(For Domestic or Foreign, Profit or Non-Profit)

Filing Fee \$25.00

THE UNDERSIGNED DESIRING TO FILE A:

(CHECK ONLY ONE (1) BOX)

(1) ☐ Reinstatement & Appointment of Agent (for failure to maintain a statutory agent) (108-REN)	(2) ☐ Reinstatement & Appointment of Agent for a Foreign Corporation (for failure to maintain a statutory agent) (111-FREA)	(3) ☒ Reinstatement of a Non-Profit Corporation (for failure to file a statement of continued existence) (109-RENN)
(4) ☐ Reinstatement of a Registered Partnership Having Limited Liability (for failure to file annual or biennial reports) (112-PLR) THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT ANNUAL OR BIENNIAL REPORTS WITH FILING FEES		(5) ☐ Reinstatement of a Professional Corporation (for failure to file annual or biennial reports) (110-RENP) THIS FORM MUST BE ACCOMPANIED BY ALL DELINQUENT ANNUAL OR BIENNIAL REPORTS WITH FILING FEES

Complete ALL of the general information in this section for the box checked above.

Name of Entity Pigeon Run United Methodist Church

Charter or Registration No. 305429

Cancellation Date The entity was canceled on (list date): May 6th, 2003
(Date)

Complete the information in this section if box (1) or (2) is checked.

Name and Address of New Agent (if applicable)

(Name) _____

(Street) _____

(City) _____ Ohio _____
(State) (Zip Code)

NOTE: P.O. Box Addresses are NOT acceptable.

ACCEPTANCE OF APPOINTMENT

The Undersigned, _____, named herein as the Statutory agent for, _____ hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: _____
(Statutory Agent)

REQUIRED

Must be authenticated (signed) by an authorized representative (See Instructions)

Don Toland
Authorized Representative

5-22-03
Date