

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000010955

FILED
Jan 11, 2007
Secretary of State

Entity Name: STRONG TOWER CENTER OF DELIVERANCE MINISTRIES INC.

Current Principal Place of Business:

4771 100 WAY N SUITE 101
MADEIRA BEACH, FL 33708

New Principal Place of Business:

2401 5TH STREET SOUTH
ST. PETERSBURG,, FL 33705

Current Mailing Address:

PO BOX 86663
MADEIRA BEACH, FL 33708

New Mailing Address:

1231 27TH AVENUE SOUTH
ST. PETERSBURG, FL 33705

FEI Number: 47-0945732 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MILLER, SHWRONNE
4771 100 WAY N SUITE 101
MADEIRA BEACH, FL 33708 US

Name and Address of New Registered Agent:

MILLER, SHWRONNE
1231 27TH AVENUE SOUTH
ST. PETERSBURG, FL 33705 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SHWRONNE K. MILLER

01/11/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPC () Delete
Name: MILLER, ABRAM
Address: 4771 100 WAY N SUITE 101
City-St-Zip: MADEIRA BEACH, FL 33708

Title: DAS () Delete
Name: MILLER, SHWRONNE
Address: 4771 100 WAY N SUITE 101
City-St-Zip: MADEIRA BEACH, FL 33708

Title: DT () Delete
Name: MILLER, SHANEY L
Address: 2209 63RD AVE S APT 317
City-St-Zip: ST PETERSBURG, FL 33712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPC (X) Change () Addition
Name: MILLER, ABRAM
Address: 1231 27TH AVENUE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33705

Title: DAS (X) Change () Addition
Name: MILLER, SHWRONNE
Address: 1231 27TH AVENUE SOUTH
City-St-Zip: ST. PETERSBURG, FL 33705

Title: DT (X) Change () Addition
Name: MILLER, SHAUNEE L
Address: 2209 63RD AVE S APT 317
City-St-Zip: ST PETERSBURG, FL 33712

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHWRONNE K. MILLER

DAS

01/11/2007

Electronic Signature of Signing Officer or Director

Date