

# 2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N09000007188

FILED  
Feb 14, 2012  
Secretary of State

**Entity Name:** TRUE LIFE WORSHIP TEMPLE, INC.

**Current Principal Place of Business:**

3260 NIGHT BREEZE LN  
LAKE MARY, FL 32746

**New Principal Place of Business:**

2619 S FRENCH AVE SUITE D  
SANFORD, FL 32771

**Current Mailing Address:**

3260 NIGHT BREEZE LN  
LAKE MARY, FL 32746

**New Mailing Address:**

2619 S FRENCH AVENUE SUITE D  
SANFORD, FL 32771

FEI Number: 27-0530048

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SMITH, DAVE ANTHONY  
3260 NIGHT BREEZE LN  
LAKE MARY, FL 32746 US

**Name and Address of New Registered Agent:**

SMITH, DAVE ANTHONY  
952 FORT SMITH BLVD  
DELTONA, FL 32738 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: DAVE SMITH

02/14/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SMITH, DAVE ANTHONY  
Address: 952 FORT SMITH BLV  
City-St-Zip: DELTONA, FL 32738

Title: T  
Name: MARIE, FACEY A  
Address: 1975 FORT SMTH BLVD  
City-St-Zip: DELTONA, FL 32738

Title: S  
Name: WASHINGTON, ANNETTE  
Address: 820 SAXON BLVD  
City-St-Zip: DELTONA, FL 32738

I hereby 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 all other like empowered.

SIGNATURE: DAVE SMITH

PRES

02/14/2012

Electronic Signature of Signing Officer or Director

Date