2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

04 DEC 29 PM 1:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 704026

1. Entity Name
THE CHURCH OF THE LIVING GOD INC. OF DELRAY BEACH FLORIDA

Principal Place of Business	Mailing Address
44 SW 11TH AVENUE DELRAY BEACH, FL 33444 US	305 ~~SW~~ 4TH AVENUE N.W. DELRAY BEACH, FL 33444 US

2. Principal Place of Business	3. Mailing Address
44 S.W. 11th avenue	305 N.W. 4th Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Delray Beach Florida	City & State: Delray Bch. Florida
Zip: 33444 / Country: P.B. County	Zip: 33444 / Country: Palm Bch. Co

REINSTATEMENT

11012084 — TREINNP — CR2E099 (6/04) 04

4. FEI Number: 65-0118537 — ~~Applied For~~ / Not Applicable

5. Certificate of Status Desired ☑ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CLECKLEY, RICHARD L
305 ~~SW~~ 4TH AVENUE N.W.
DELRAY BEACH, FL 33444

7. Name and Address of New Registered Agent

Name: Cleckley Richard L

Street Address (P.O. Box Number is Not Acceptable): 305 N.W. 4th Ave

City: Delray Beach FL Zip Code: 33444

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Richard L. Cleckley — 12/27/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $236.25
After January 1, 2005, Fee will be $297.50

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BALDWIN, M A 2555 DOLPHIN DR. DELRAY BEACH, FL 33445	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLECKLEY, CLARA W 305 NW 4TH AVE DELRAY BEACH, FL 33444	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 900004369929 12/29/04--01025--003 **245.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOGES, G. 137 SW 11TH AVE. DELRAY BCH, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLECKLEY, R.L. 305 NW 4TH AVE. DELRAY BEACH, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WHITE, M. 3012 GRACE AVE. BRONX, NY	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Cleckley Richard III 1110 Lancewood Pl. Delray Bch. FL 33444	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard L Cleckley — 12/27/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #