

**2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 704717

**FILED**  
**Dec 02, 2004**  
**Secretary of State****Entity Name:** LAKEVIEW UNITED METHODIST CHURCH, INCORPORATED**Current Principal Place of Business:**11500 N W 12 AVE  
MIAMI FLA, 33168**New Principal Place of Business:**11500 N W 12 AVE  
MIAMI, FL 33168**Current Mailing Address:**P O BOX 680547  
MIAMI, FL 33168 US**New Mailing Address:****FEI Number:** 59-1264178 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
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:**HILL, ALBERT  
900 N.W. 153RD STREET  
MIAMI, FL 33169 US**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:****Title:** S ( ) Delete  
**Name:** PALMER, MAVIS  
**Address:** 12535 NW 20TH AVE  
**City-St-Zip:** MIAMI, FL 33167**Title:** T ( ) Delete  
**Name:** THOMPSON, CHERRY  
**Address:** 6890 LONGBOW BEND  
**City-St-Zip:** DAVIE, FL**Title:** T ( ) Delete  
**Name:** WATLER, ELMA  
**Address:** 1100 N.W. 31ST STREET  
**City-St-Zip:** MIAMI, FL**Title:** T ( ) Delete  
**Name:** ARCHIBALD, ADA  
**Address:** 750 NW 126TH ST  
**City-St-Zip:** MIAMI, FL**Title:** T ( ) Delete  
**Name:** CLARKE, ANDERSON M.  
**Address:** 843 NW 75TH STREET  
**City-St-Zip:** MIAMI, FL**Title:** C ( ) Delete  
**Name:** OVIEL, SMITH  
**Address:** 11102 NW 11TH AVE  
**City-St-Zip:** MIAMI, FL 33168**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** T (X) Change ( ) Addition  
**Name:** PINDER, MARY  
**Address:** 12410 NW 21 PL  
**City-St-Zip:** MIAMI, FL 33167**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** T (X) Change ( ) Addition  
**Name:** BECKLES, DAVID  
**Address:** 843 NW 75TH STREET  
**City-St-Zip:** MIAMI, FL 33150**Title:** C (X) Change ( ) Addition  
**Name:** ONIEL, SMITH  
**Address:** 11102 NW 11TH AVE  
**City-St-Zip:** MIAMI, FL 33168

I hereby certify that the information supplied with this filing does not qualify for the 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 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: AL HILL

RA

12/02/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director\_\_\_\_\_  
Date