

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED  
AND  
FILED

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

06 AUG 30 PM 4:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 766343

1. Corporation Name

THE CHURCH OF GOD OF THE LORD  
JESUS CHRIST, INC.

2. Principal Office Address

4205 SW 56 AVE 7099 N/W 48 CT

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

DAVIE, FL

City & State

LAUDERHILL, FL

Zip

33314

Country

BROWARD

Zip

33319

Country

BROWARD

4. Date Incorporated or Qualified  
To Do Business in Florida

OCT. 29, 1963

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

LEONARD DUPONT

Street Address (P.O. Box Number is Not Acceptable)

7099 N/W 48 CT

Suite, Apt. #, Etc.

City

LAUDERHILL

State

FL

Zip Code

33319

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

Leonard Dupont

REGISTERED AGENT MUST SIGN

Date

8/14/06

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
T	MAMIE DUPONT	7099 N/W 48 CT	LAUDERHILL, FL 33319
T	ROSMAN DEJUSTE	2800 N/W 48 CT	LAUDERDALE, FL 33319
T	JERLEAN ROBERTS	1720 N/W 36 AVE	FT. LAUDERDALE, FL 33311
D	LEONARD DUPONT	7099 N/W 48 CT	LAUDERHILL 33319

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Leonard Dupont

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/14/06

Date

954-709-9336

Daytime Phone #