

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 713515

FILED
Oct 26, 2008
Secretary of State

Entity Name: PEACEFUL ZION MISSIONARY BAPTIST CHURCH OF WEST PALM BEACH, FLORIDA, INC.

Current Principal Place of Business:

819 - 8TH ST.
WEST PALM BEACH, FL 33411

New Principal Place of Business:

Current Mailing Address:

819 - 8TH ST.
WEST PALM BCH., FL 33401

New Mailing Address:

FEI Number: 05-0081722 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

AUSTIN, SAM
222 PONCE DE LEON
ROYAL PALM BEACH, FL 33411 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: SAM AUSTIN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BURRS, WILLIAM H PASTOR
Address: 1500 W. 30TH STREET
City-St-Zip: RIVIERA BEACH, FL

Title: T () Delete
Name: WATKINS, JAMES
Address: 1468 N MAGNOLIA DR
City-St-Zip: WEST PALM BEACH, FL 33411

Title: D () Delete
Name: AUSTIN, SAM DEACON
Address: 222 PONCE DE LEON
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: DT () Delete
Name: HAZEL, DOROTHY
Address: 1071 W. 1ST STREET
City-St-Zip: RIVIERA BEACH, FL

Title: DT () Delete
Name: UNDERWOOD, GLORIA
Address: 322 W. 13TH STREET
City-St-Zip: RIVIERA BEACH, FL

Title: DS () Delete
Name: WILLIAMS, CORINE
Address: 390 W. 22ND STREET
City-St-Zip: RIVIERA BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM H BURRS

DP

10/26/2008

Electronic Signature of Signing Officer or Director

Date