2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT#714476

FILED Oct 15, 2008 Secretary of State

Entity Name: BIBLE BAPTIST CHURCH OF PEMBROKE PINES, INC.

| Current P | Principal Place of Business: | New Principal Place of Business: |
|---|---|--|
| 7 SW 129 PEMBRO | TH AVE. KE PINES, FL 33027 US | |
| Current N | Mailing Address: | New Mailing Address: |
| 7 SW 129 PEMBROI | TH AVE. KE PINES, FL 33027 US | |
| FEI Number | r: 59-6080540 FEI Number Applied For () | FEI Number Not Applicable () Certificate of Status Desired () |
| Name and | d Address of Current Registered Agent: | Name and Address of New Registered Agent: |
| 1511 NW | W, JOEL S 85TH WAY KE PINES, FL 33024 US | |
| | e named entity submits this statement for the of Florida. | ne purpose of changing its registered office or registered agent, or both, |
| SIGNATU | RE: JOEL S. HENSHAW | |
| | Electronic Signature of Registered | Agent Date |
| | | |
| OFFICER | S AND DIRECTORS: | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR |
| OFFICER Title: Name: Address: City-St-Zip: | VTD () Delete HANSON, KENNETH W 2000 NW 91 TERRACE PEMBROKE PINES, FL 33024 | ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR Title: () Change () Addition Name: Address: City-St-Zip: |
| Title: Name: Address: City-St-Zip: Title: Name: Address: | VTD () Delete HANSON, KENNETH W 2000 NW 91 TERRACE | Title: () Change () Addition Name: Address: |
| Title: Name: Address: | VTD () Delete HANSON, KENNETH W 2000 NW 91 TERRACE PEMBROKE PINES, FL 33024 SD () Delete MURPHY, MIGDALIA 1300 SW 124TH TERRACE #P206 | Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: |
| Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address: | VTD () Delete HANSON, KENNETH W 2000 NW 91 TERRACE PEMBROKE PINES, FL 33024 SD () Delete MURPHY, MIGDALIA 1300 SW 124TH TERRACE #P206 PEMBROKE PINES, FL 33027 PCD () Delete HENSHAW, JOEL S 1511 NW 85TH WAY | Title: () Change () Addition Name: 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: JOEL S. HENSHAW PCD 10/15/2008