

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 21, 2009
Secretary of State**

DOCUMENT# 715414

Entity Name: FIRST ASSEMBLY OF GOD OF DELAND, INC.

Current Principal Place of Business:

1500 E. INTERNATIONAL SPEEDWAY BLVD.
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

1500 E. INTERNATIONAL SPEEDWAY BLVD.
DELAND, FL 32724

New Mailing Address:

FEI Number: 59-6224702 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MODICA, MICHAEL
4390 GRANT ST
DELTONA, FL 32725 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: MICHAEL MODICA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MODICA, MICHAEL
Address: 4390 GRANT ST
City-St-Zip: DELAND, FL

Title: DT () Delete
Name: YOUNGQUIST, RALPH
Address: 2393 OAK PARK RD
City-St-Zip: DELAND, FL

Title: DS () Delete
Name: HAWKINS, CARL
Address: 891 CRITTENDEN AVE.
City-St-Zip: ORANGE CITY, FL

Title: D () Delete
Name: CRUZ, ROBERT
Address: 132 W. VOORHIS AVE
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: RYLE, JAMES
Address: 2025 GLENWOOD HAMMOCK RD
City-St-Zip: GLENWOOD, FL 32722

Title: D () Delete
Name: JOHNSON, CHAD
Address: 122 H.E. VILLA CAPRI CIRCLE
City-St-Zip: DELAND, FL 32724

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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City-St-Zip:

Title: () Change () Addition
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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: RALPH YOUNGQUIST

Electronic Signature of Signing Officer or Director

DT

10/21/2009

Date