

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 721292

FILED  
Feb 15, 2006  
Secretary of State

**Entity Name:** NEW JERUSALEM BAPTIST CHURCH OF LAKELAND, FLORIDA, INC.

**Current Principal Place of Business:**

1125 N. NEW YORK AVE.  
P O BOX 953  
LAKELAND, FL 338027953

**New Principal Place of Business:**

**Current Mailing Address:**

1125 N. NEW YORK AVE.  
P O BOX 953  
LAKELAND, FL 338027953

**New Mailing Address:**

**FEI Number:** 59-2413394

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SYKES, BARBARA E.  
1204 LONG ST  
LAKELAND, FL 33801 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: BARBARA E. SYKES

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: DOWNING SR., JIMMIE L PASTOR  
Address: 1525 WRIGHT DR.  
City-St-Zip: LAKELAND, FL 33805 US

Title: V ( ) Delete  
Name: MOORE, ROY L DEA.  
Address: 3411 KATHY COURT  
City-St-Zip: LAKELAND, FL 33810 US

Title: S ( ) Delete  
Name: SYKES, BARBARA E,  
Address: 1204 LONG ST  
City-St-Zip: LAKELAND, FL 33801

Title: T ( ) Delete  
Name: MURRAY, GROVER G  
Address: 7981 OAK RUN CIRCLE  
City-St-Zip: LAKELAND, FL 33809 US

Title: DC ( ) Delete  
Name: JOE, ERNEST L JR  
Address: 1717 GREENWOOD RD  
City-St-Zip: LAKELAND, FL 33805 US

Title: T ( ) Delete  
Name: INGRAM, EDDIE  
Address: 1014 NORTH MADISON AVENUE  
City-St-Zip: LAKELAND, 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  
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 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: DR. JIMMIE L. DOWNING

PRES

02/15/2006

Electronic Signature of Signing Officer or Director

Date