2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 733489

FILED Dec 03, 2004 Secretary of State

Entity Name: HOLY TEMPLE OF GOD, INCORPORATED

Current P						
	rincipal Place of Business:	New Principal Place of Business:				
1220 N.E.	IARK HOLY TEMPLE OF GOD 23RD AVENUE ILLE, FL 32609 US					
Current N	lailing Address:	New Mailing Ad	dress:			
P. O. BOX GAINESVI	(975 ILLE, FL 32602					
ln accordan	r: 59-2786486 FEI Number Applied For () FEI I nce with s. 607.193(2)(b), F.S., the corporation did not received Address of Current Registered Agent:		() Certificate of Status Desired (X) ess of New Registered Agent:			
1246 NE 1	WANDA J 6TH PLACE ILLE, FL 32609 US					
	e named entity submits this statement for the purpos e of Florida.	e of changing its regi	stered office or registered agent, or both,			
SIGNATU	RE:					
	Electronic Signature of Registered Agent		Date			
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS				
Title: Name: Address: City-St-Zip:	PD () Delete CAMPS, WALTER SR. 3015 NE 13TH DRIVE GAINESVILLE, FL 32609	Title: Name: Address: City-St-Zip:	() Change () Addition			
Title: Name: Address: City-St-Zip:	VD () Delete HUTCHINSON, HARVEY JR. 3869 SE 9 LANE MELROSE, FL 32666	Title: Name: Address: City-St-Zip:	() Change () Addition			
Title: Name: Address: City-St-Zip:	VD () Delete BRYANT, MAMIE 113 BIG APPLE ROAD EAST PALATKA, FL 32131	Title: Name: Address: City-St-Zip:	() Change () Addition			
	RS () Delete CAMPS, WILMA R	Title: Name:	() Change () Addition			
Title: Name: Address: City-St-Zip:	3015 NE 13TH DRIVE	Address: City-St-Zip:				
Name: Address:	3015 NE 13TH DRIVE		()Change()Addition			

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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:	WA	:R (UAIVI.	PS SI	≺.				PD	12/03/200	04
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