

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 763199

FILED
Nov 21, 2007
Secretary of State

Entity Name: SAINT MATTHEWS MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

P.O. BOX 947
8550 64TH AVENUE
WABASSO, FL 32970 US

New Principal Place of Business:

8550 64TH AVENUE
WABASSO, FL 32970 US

Current Mailing Address:

P.O. BOX 381
WABASSO, FL 32970 US

New Mailing Address:

P.O. BOX 947
WABASSO, FL 32970 US

FEI Number: 59-2357994 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MINNIS, WILLIAM C JR
8466 63RD AVENUE
C/O P.O. BOX 381
WABASSO, FL 32970 US

Name and Address of New Registered Agent:

FLOWERS, HERBERT E SR
4155 58TH AVENUE
VERO BEACH, FL 32967 US

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: HERBERT E. FLOWERS

11/21/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: MINNIS, WILLIAM JR.,
Address: 8466 63RD AVE.
City-St-Zip: WABASSO, FL 32970

Title: T () Delete
Name: JOHNSON, TAMARA F
Address: P.O. BOX 777
City-St-Zip: WABASSO, FL 32970

Title: TRST () Delete
Name: WEAVER, ETHEL
Address: P.O. BOX 413
City-St-Zip: WABASSO, FL 32970

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FLOWERS, HERBERT E SR
Address: 4155 58TH AVENUE
City-St-Zip: VERO BEACH, FL 32967

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

Title: TRST (X) Change () Addition
Name: MINNIS, WILLIAM C JR
Address: P.O. BOX 413
City-St-Zip: WABASSO, FL 32970

Title: VP () Change (X) Addition
Name: HART, DENNY
Address: 4260 47TH PLACE
City-St-Zip: VERO BEACH, FL 32967

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: HERBERT E. FLOWERS SR

P

11/21/2007

Electronic Signature of Signing Officer or Director

Date