2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# 771039

Entity Name: BELLE GLADE DELIVERANCE REVIVAL CENTER, INC.

Current Principal Place of Business:

748 SW 14TH STREET
BELLE GLADE, FL 33430

New Principal Place of Business:

Current Mailing Address:

748 SW 14TH STREET
BELLE GLADE, FL 33430

New Mailing Address:

FEI Number: 59-2773621 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIGHTNER, JOHNNIE
748 SW 14TH STREET
BELLE GLADE, FL 33430 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: WILLIE LAWRENCE SR.

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LIGHTNER, JOHNNIE
Address: 748 SW 14TH STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: TD ( ) Delete
Name: LIGHTNER, FRANCES
Address: 748 SW 14TH STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: T ( ) Delete
Name: MILLER, JOHN JR
Address: 748 SW 14TH STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: AT ( ) Delete
Name: CLARK, LATONIA
Address: 122 JOG RD
City-St-Zip: SYLVESTOR, GA 31702

Title: S ( ) Delete
Name: BAILEY, TERRY D
Address: W 36TH ST
City-St-Zip: RIVIERA BEACH, 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:

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: JOHNNIE LIGHTNER PD 04/22/2009

Electronic Signature of Signing Officer or Director — Date