

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000005082

FILED  
Sep 30, 2009  
Secretary of State

Entity Name: HOUSE OF PRAYER CHRISTIAN CHURCHES OF AMERICA, INC.

**Current Principal Place of Business:**

6538 COLLINS AVE.  
SUITE #141  
MIAMI BEACH, FL 33141

**New Principal Place of Business:**

6538 COLLINS AVE. SUITE #141  
MIAMI BEACH, FL 33141

**Current Mailing Address:**

**New Mailing Address:**

FEI Number: 27-0023914      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**      **Name and Address of New Registered Agent:**

NOSTRANT, DENNIS A  
6538 COLLINS AVE. SUITE #141  
MIAMI BEACH, FL 33141 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: DENNIS A. NOSTRANT

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CHRM ( ) Delete  
Name: DENIS, RONY  
Address: 428 WILLOW OAK LANE  
City-St-Zip: HINESVILLE, GA 31313

Title: P ( ) Delete  
Name: DENIS, RONY  
Address: 428 WILLOW OAK LANE  
City-St-Zip: HINESVILLE, GA 31313

Title: VCHR ( ) Delete  
Name: REIP, DAVID A  
Address: P.O. BOX 1344  
City-St-Zip: HINESVILLE, GA 31310

Title: V ( ) Delete  
Name: REIP, DAVID A  
Address: P.O. BOX 1344  
City-St-Zip: HINESVILLE, GA 31310

Title: SD ( ) Delete  
Name: NOSTRANT, DENNIS A  
Address: 6538 COLLINS AVE. SUITE #141  
City-St-Zip: MIAMI BEACH, FL 33141

Title: TD ( ) Delete  
Name: OLOANS, ANTHONY S  
Address: 2275 HIGHWAY 196 WEST  
City-St-Zip: HINESVILLE, GA 31313

**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 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: NOSTRANT, DENNIS A

SD

09/30/2009

Electronic Signature of Signing Officer or Director

Date