2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0000001427

Entity Name: NEW-VISION BAPTIST CHURCH, INC.

FILED Jun 08, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

807 67TH AVE DR W 6113 41ST STREET EAST BRADENTON, FL 34207 BRADENTON, FL 34203

Current Mailing Address: New Mailing Address:

807 67TH AVE DR W 6113 41ST STREET EAST BRADENTON, FL 34207 BRADENTON, FL 34203

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

BIEN-AIME, ORILANGE
807 67TH AVE DR W
BRADENTON, FL 34207 US
BIEN-AIME, ORILANGE
6113 41ST STREET EAST
BRADENTON, FL 34203 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: ORILANGE BIEN-AIME 06/08/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 BIEN-AIME, ORILANGE
 Name:
 BIEN-AIME, ORILANGE

 Address:
 807 67TH AVE DR W
 Address:
 6113 41ST STREET EAST

 City-St-Zip:
 BRADENTON, FL 34207
 City-St-Zip:
 BRADENTON, FL 34203

Title: T () Delete Title: () Change () Addition

 Name:
 JOSEPH, ABNER
 Name:

 Address:
 2024 84TH CIR NW
 Address:

 City-St-Zip:
 BRADENTON, FL 34209
 City-St-Zip:

Title: S (X) Delete Title: () Change () Addition

 Name:
 FERDINAND, IRONCE
 Name:

 Address:
 604 60TH AVE E
 Address:

 City-St-Zip:
 BRADENTON, FL 34203
 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: ORILANGE BIEN-AIME P 06/08/2007