

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000003181

**FILED**  
**Oct 10, 2007**  
**Secretary of State**

**Entity Name:** PASTORS GUILD OF AMERICA INC.

**Current Principal Place of Business:**

6060 SW 7TH STREET  
MARGATE, FL 33068

**New Principal Place of Business:**

**Current Mailing Address:**

6060 SW 7TH STREET  
MARGATE, FL 33068

**New Mailing Address:**

**FEI Number:** 65-1008434      **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:**

GRANT, DENNIS D  
273 NW 80TH TERRACE  
MARGATE, FL 33063      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 GRANT

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: FD      ( ) Delete  
Name: GRANT, DENNIS D  
Address: 273 NW 80TH TERRACE  
City-St-Zip: MARGATE, FL 33063

Title: PD      ( ) Delete  
Name: LOUDEN, GIFFORD H  
Address: P.O. BOX 770263  
City-St-Zip: CORAL SPRINGS, FL 33077

Title: DT      ( ) Delete  
Name: MURRAY, MARLENE  
Address: 3671 HIGH PINE DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VPD      ( ) Delete  
Name: GUTHRIE, ALBERT  
Address: 2610 NW 119TH STREET  
City-St-Zip: MIAMI, FL 33160

Title: D      ( ) Delete  
Name: WINSOME, LOUDEN  
Address: 5035 SABRELINE TER  
City-St-Zip: GREENACRES, FL 33463

Title: D      ( ) Delete  
Name: GRANT, YVONNE  
Address: P.O. BOX 770263  
City-St-Zip: CORAL SPRINGS, FL 33077

**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: DENNIS GRANT

FD

10/10/2007

Electronic Signature of Signing Officer or Director

Date