

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 05, 2008
Secretary of State

DOCUMENT# N00000004365

Entity Name: THE A.C.O.J. NEW LIFE & DELIVERANCE MINISTRIES, INTL. DEVELOPMENTAL CENTER, INC.

Current Principal Place of Business:

2140 N.W. 2ND STREET
POMPANO BEACH, FL 33069

New Principal Place of Business:

2101 N.W. 2ND STREET
POMPANO BEACH, FL 33069

Current Mailing Address:

P.O. BOX 668566
POMPANO BEACH, FL 33066 US

New Mailing Address:

FEI Number: 26-3664391 **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:

JENKINS, ALEX L SR
312 N.W. 17TH AVENUE
POMPANO BEACH, FL 33069 US

Name and Address of New Registered Agent:

JENKINS, ALEX L SR
2101 N.W. 2ND STREET
POMPANO BEACH, FL 33069 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: ALEX L JENKINS

11/05/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JENKINS, ALEX L SR
Address: P.O. BOX 668566
City-St-Zip: POMPANO BEACH, FL 33066

Title: D () Delete
Name: JENKINS, LATRINA W DR
Address: P.O. BOX 667215
City-St-Zip: POMPANO BEACH, FL 33066

Title: S () Delete
Name: DAWKINS, SHANNON S
Address: 907 N POWERLINE RD
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: JENKINS, ALEX L II
Address: 1700 N.W. 6TH AVE
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: WARD, LORETTA
Address: 1700 N.W. 6TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: WARD, EDDIE B
Address: 1700 N.W. 6TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: DAWKINS, SHANNON S
Address: 907 N POWERLINE RD
City-St-Zip: POMPANO BEACH, FL 33069

Title: S (X) Change () Addition
Name: OLIVER, CONNIE
Address: 1700 N.W. 6TH AVE
City-St-Zip: POMPANO BEACH, FL 33060

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: ALEX L JENKINS

P

11/05/2008

Electronic Signature of Signing Officer or Director

Date