

# 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000005704

FILED  
Mar 27, 2011  
Secretary of State

**Entity Name:** TRUE PENTECOSTAL ASSEMBLIES WORLD WIDE, INC.

**Current Principal Place of Business:**

1009 S. FISKE BLVD.  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

1009 S. FISKE BLVD.  
ROCKLEDGE, FL 32955

**New Mailing Address:**

**FEI Number:** 59-3664613

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JONES, SYLVESTER  
808 TOPAZ DR.  
ROCKLEDGE, FL 32955 US

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

JONES, SYLVESTER  
1230 SERENGETTI WAY  
ROCKLEDGE, FL 32955 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: BISHOP, SYLVESTER JONES

03/27/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T  
Name: WIGGINS, OLA M  
Address: 1478 BOWLING GREEN CIRCLE  
City-St-Zip: RALEIGH, NC

Title: D  
Name: JONES, JOYCE D  
Address: 1009 S. FISKE BLVD  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D  
Name: JONES, JUSTIN  
Address: 1009 S. FISKE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D  
Name: BRYANT, RAYMOND J  
Address: 925 OSPREY LANE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D  
Name: JONES, LAMAR  
Address: 1009 S. FISKE BLVD  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D  
Name: BAILEY, SADIE  
Address: 1009 S FISKE BLVD  
City-St-Zip: ROCKLEDGE, FL 32955

I hereby 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 all other like empowered.

SIGNATURE: SYLVESTER JONES

DR.

03/27/2011

Electronic Signature of Signing Officer or Director

Date