

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N01000004907 1. Entity Name END-TIME APOSTOLIC TABERNACLE OF PRAYER FOR ALL PEOPLE & CHRISTIAN COMMUNITY OUTREACH MINISTRY,			
Principal Place of Business 1025 W. PALMETTO AVON PARK, FL 33825		Mailing Address 1401 N. LAKE AVENUE AVON PARK, FL 33825	
2. Principal Place of Business 1015 W. Bell St #32		3. Mailing Address P.O. Box 46	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Avon Park, FL		City & State Avon Park, FL	
Zip 33825		Zip 33825-0040	
Country USA		Country USA	
6. Name and Address of Current Registered Agent ABLES, CLIFFORD M III 551 S COMMERCE AVE SEBRING, FL 33870-3869		7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.		DATE 12-19-05 (NOTE: Registered Agent signature required when reinstating)	
FILE NOW!!! FEE IS \$236.25 After January 1, 2006, Fee will be \$297.50		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBINSON, BARBARA 1207 W AVON BLVD AVON PARK, FL 33825	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, ELDER H 163 W 20TH STREET RIVIERA BEACH, FL 33404	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, ELDER J 163 W 20TH STREET RIVIERA BEACH, FL 33404	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mary Benton 1017 Dinner Lake Circle Sebring, FL 33870	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EWA A. Blackstock 809 S. Palmer ST Avon Park, FL 33825	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 10/27/05 (863) 873-1222 Daytime Phone #	

FILED
 05 DEC 23 AM 8:53
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA



10252005 REIN-NP CR2E099 (6/04)

4. FEI Number 65-1008513 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

REINSTATEMENT

T. Roberts DEC 20 2005