

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N01000005516

**FILED**  
**Aug 22, 2012**  
**Secretary of State**

**Entity Name:** OVERCOMING BODY OF JESUS CHRIST HOUSE OF PRAYER, INC.

**Current Principal Place of Business:**

360 SW JACKSON AVE  
MADISON, FL 32340

**New Principal Place of Business:**

360 SW JACKSON AVE  
MADISON, FL 32340 US

**Current Mailing Address:**

5780 SW CR #14  
MADISON, FL 32340

**New Mailing Address:**

137 CEDAR RIDGE LANE  
SANFORD, FL 32771 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

GRANT, NORMAN  
RT 1, BOX 441E  
MADISON, FL 32340 US

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

GRANT, NORMAN  
5780 SW COUNTRY RD 14  
MADISON, FL 32340 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: GRANT NORMAN

08/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: BIS  
Name: NORMAN, GRANT  
Address: 5780 SW COUNTRY 14  
City-St-Zip: MADISON, FL 32340 US

Title: MOTH  
Name: NORMAN, JOHNNIE MAE  
Address: 5780 SW COUNTRY 14  
City-St-Zip: MADISON, FL 32340 US

Title: SEC.  
Name: HARRIS, LORRAINE  
Address: 137 CEDAR RIDGE LANE  
City-St-Zip: SANFORD, FL 32771 US

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: GRANT NORMAN

BIS

08/22/2012

Electronic Signature of Signing Officer or Director

Date