

# **2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N01000006414

**FILED**  
**Apr 16, 2014**  
**Secretary of State**

**Entity Name:** THE ARK OF JESUS-CHRIST, INC.

**Current Principal Place of Business:**

THE ARK OF JESUS-CHRIST INC.  
619 53RD ST  
WEST PALM BEACH, FL 33407 US

**New Principal Place of Business:**

**Current Mailing Address:**

619 53RD ST  
WEST PALM BEACH, FL 33407

**New Mailing Address:**

**FEI Number:** 65-1122765

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ST LOUIS, NELVIL REV  
619 53RD ST  
WEST PALM BEACH, FL 33407 US

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

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:** REV., NELVIL ST LOUIS

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** ST LOUIS, NELVIL REV,  
**Address:** 619 53RD ST  
**City-St-Zip:** WEST PALM BEACH, FL 33407 US

**Title:** SD  
**Name:** EDOUARD, CHRISTIAN  
**Address:** 2220 NORTH AUSTRALIAN AVE  
**City-St-Zip:** WEST PALM BEACH, FL 33407 US

**Title:** TD  
**Name:** ST LOUIS, JUNIE  
**Address:** 619 53RD STREET  
**City-St-Zip:** WEST PALM BEACH, FL 33407 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:** REV., NELVIL ST LOUIS

**PRES**

**04/16/2014**

Electronic Signature of Signing Officer or Director

Date