

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000007959

FILED  
Nov 05, 2014  
Secretary of State

**Entity Name:** OUR FATHER'S HOUSE OF PRAYER MINISTRIES CHURCH, INC.

**Current Principal Place of Business:**

17401 NW 2ND AVENUE  
MIAMI GARDENS, FL 33169

**New Principal Place of Business:**

3974 NW 167TH STREET  
OPA LOCKA, FL 33054

**Current Mailing Address:**

17401 NW 2ND AVENUE  
MIAMI GARDENS, FL 33169

**New Mailing Address:**

3974 NW 167TH STREET  
OPA LOCKA, FL 33054

**FEI Number:** 65-1151100

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RUSSEL, STEPHANIE E  
3814 JASMINE AVENUE  
MIRAMAR, FL 33023 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:** STEPHANIE E. RUSSELL

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** RUSSELL, STEPHANIE  
**Address:** 3814 SW 68TH AVE  
**City-St-Zip:** MIRAMAR, FL 33023

**Title:** TD  
**Name:** LESTER, PATRICIA  
**Address:** 3195 FOXCROFT RD F-206  
**City-St-Zip:** MIRAMAR, FL 33025

**Title:** TD  
**Name:** LOCKHART, VERONICA  
**Address:** 3610 NW 169TH TERRACE  
**City-St-Zip:** MIAMI GARDENS, FL 33056

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:** PATRICIA LESTER

TD

11/05/2014

Electronic Signature of Signing Officer or Director

Date