## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N01000008143

FILED Jul 05, 2007 Secretary of State

Entity Name: REDEEMER PRESBYTERIAN CHURCH OF NORTH MIAMI, INC.

Current Principal Place of Business: New Principal Place of Business:

1511 NE 146TH STREET 567 NE 109 STREET NORTH MIAMI, FL 33161 MIAMI, FL 33161

Current Mailing Address: New Mailing Address:

1511 NE 146TH STREET 1580 NE 144 STREET NORTH MIAMI, FL 33161 NORTH MIAMI, FL 33161

FEI Number: 65-1152835 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DORCINVIL, GUEILLANT
1511 NE 146TH STREET
NORTH MIAMI, FL 33161 US
DORCINVIL, GUEILLANT
1580 NE 144 STREET
MIAMI, FL 33161 US
MIAMI, FL 33161 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: GUELLANT DORCINVIL 07/05/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: EDWARD, JEAN ROBERT Name: MEXUME, CONSTANTIN Address: 1511 NE 146TH STREET Address: 1580 NE 144 STREET

 Address:
 1511 NE 146TH STREET
 Address:
 1580 NE 144 STREET

 City-St-Zip:
 NORTH MIAMI, FL 33161
 City-St-Zip:
 MIAMI, FL 33161

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: AUGUSTIN, JEAN CLAUDE Name: TOUSSAINT, EDDIE

 Name
 Address:
 1511 NE 146TH STREET
 Address:
 1580 NE 144 STREET

 City-St-Zip:
 NORTH MIAMI, FL 33161
 City-St-Zip:
 MIAMI, FL 33161

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

 Name:
 LOUIS, CHARMANT XVI
 Name:
 LOUIS, CHARMANT XVI

 Address:
 1511 NE 146TH STREET
 Address:
 1580 NE 144 STREET

 City-St-Zip:
 NORTH MIAMI, FL 33161
 City-St-Zip:
 MIAMI, FL 33161

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GUEILLANT DORCINVIL DR. 07/05/2007