

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000000765

FILED
Oct 05, 2007
Secretary of State

Entity Name: THE CHENANIAH PRAISE DANCERS, INC.

Current Principal Place of Business:

1291 SW 28TH AVENUE
BOYNTON BEACH, FL 33426 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 243741
BOYNTON BEACH, FL 33424 US

New Mailing Address:

FEI Number: 65-1108555 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MAYS, ANTHONY S
1291 SW 28TH AVE
BOYNTON BEACH, FL 33426 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: ANTHONY MAYS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MAYS, CARLA P
Address: 1291 SW 28TH AVE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: SD () Delete
Name: CAESAR, DOROTHY
Address: 332 NW 10TH AVE
City-St-Zip: DELRAY BEACH, FL 33444

Title: TD () Delete
Name: MAYS, ANTHONY S
Address: 1291 SW 28TH AVE
City-St-Zip: BOYNTON BEACH, FL 33426

Title: C () Delete
Name: FOREST, DOROTHY
Address: 2591 NW 1ST STREET
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: C () Delete
Name: SPATES, SALLY
Address: 497 SW MOLLOY TERRACE
City-St-Zip: PORT ST. LUCIE, FL 33984 US

Title: C () Delete
Name: CEASAR, WILLIE G III
Address: 712 E. CHATELAINE BLVD
City-St-Zip: DELRAY BEACH, FL 33444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CARLA BLUE

PD

10/05/2007

Electronic Signature of Signing Officer or Director

Date