

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000003332

FILED
Oct 12, 2004
Secretary of State**Entity Name:** CRUSADERS FOR CHRIST EVANGELISTIC CENTER, INC.**Current Principal Place of Business:**4234 PAPPY KENNEDY STREET
ORLANDO, FL 32811**New Principal Place of Business:****Current Mailing Address:**4234 PAPPY KENNEDY STREET
ORLANDO, FL 32811**New Mailing Address:****FEI Number:** 37-1430693 **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:**WALKER, SHIRLEY
650 CANBY CIRCLE
OCOOEE, FL 34761 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: JONES, VIRGIL
Address: 4234 PAPPY KENNEDY STREET
City-St-Zip: ORLANDO, FL 32811**Title:** V () Delete
Name: WALKER, SHIRLEY
Address: 4234 PAPPY KENNEDY STREET
City-St-Zip: ORLANDO, FL 32811**Title:** T () Delete
Name: JONES, ERIE
Address: 4234 PAPPY KENNEDY STREET
City-St-Zip: ORLANDO, FL 32811**Title:** S () Delete
Name: WILSON, DARLENE
Address: 4234 PAPPY KENNEDY STREET
City-St-Zip: ORLANDO, FL 32811**Title:** D () Delete
Name: SAPP, GERALD
Address: 4234 PAPPY KENNEDY STREET
City-St-Zip: ORLANDO, FL 32811**Title:** D () Delete
Name: ALEXANDER, KEVIN
Address: 4234 PAPPY KENNEDY STREET
City-St-Zip: ORLANDO, FL 32811**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
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Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VIRGIL JONES

P

10/12/2004

Electronic Signature of Signing Officer or Director

Date