

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N02000004380

1. Entity Name

PROVIDENCE METROPOLITAN BAPTIST CHURCH, INC.



Principal Place of Business
401 S MARTIN LUTHER KING JR BLVD
DAYTONA BEACH, FL 32114

Mailing Address
401 S MARTIN LUTHER KING JR BLVD
DAYTONA BEACH, FL 32114

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

10092005 REIN-NP

CR2E099 (8/04)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSON, RONALD N ESQ.
326 SOUTH GRANDVIEW AVENUE
DAYTONA BEACH, FL 32118

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!! FEE IS \$81.25
After January 1, 2006, Fee will be \$122.50

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME ROSSIN, ROSSIE
STREET ADDRESS 1644 STOCKING STREET
CITY-ST-ZIP DAYTONA BEACH, FL 32117

TITLE ☐ Change ☐ Addition
NAME 200060777372
STREET ADDRESS 10/19/05--01049-015 **\$61.25
CITY-ST-ZIP

TITLE D ☐ Delete
NAME JACKSON, MARTHA E
STREET ADDRESS 1644 STOCKING STREET
CITY-ST-ZIP DAYTONA BEACH, FL 32117

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME WHITE, FREDDIE D
STREET ADDRESS 437 ALAMANDA STREET
CITY-ST-ZIP DAYTONA BEACH, FL 32114

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME WHITE, JOHNNIE M
STREET ADDRESS 437 ALAMANDA STREET
CITY-ST-ZIP DAYTONA BEACH, FL 32114

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE FSD ☐ Delete
NAME STINSON, GENOMA
STREET ADDRESS 1308 LAUREL ST
CITY-ST-ZIP DAYTONA BEACH, FL 32117

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME WILSON, JESSIE
STREET ADDRESS 621 CEDAR ST
CITY-ST-ZIP DAYTONA BEACH, FL 32114

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-16-05

DATE

Daytime Phone #

10/25
aw