2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000007285

FILED May 13, 2008 Secretary of State

Entity Name: NEW WINE FELLOWSHIP OF THE PALM BEACHES INC.

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

108 HEMINGWAY CT. 13730 SUNFLOWER COURT UNIT #B

WEST PALM BEACH, FL 33415 WELLINGTON, FL 33414

Current Mailing Address: New Mailing Address:

108 HEMINGWAY CT. PO BOX 2860

ROYAL PALM BEACH, FL 33411 PALM BEACH, FL 33480 US

FEI Number: 35-2183325 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:

HERNANDEZ, DOLORES WILCOX, ADRIAN J

4756 LUQUI CT. 300 S. AÚSTRALIAN AVE. #620

WEST PALM BEACH, FL 33415 US WEST PALM BEACH, FL 33401 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: ADRIAN WILCOX 05/13/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

Name: HERNANDEZ, RAUL Name: VASQUEZ, RICHARD

Address: 108 HEMINGWAY CT. Address: 13730 SUNFLOWER COURT UNIT #B

City-St-Zip: ROYAL PALM BEACH, FL 33411 City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete Title: () Change () Addition

 Name:
 MOLINA, JOEL
 Name:

 Address:
 4091 D. PALM BEACH CIRCLE
 Address:

 City-St-Zip:
 WEST PALM BEACH, FL 33406
 City-St-Zip:

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

Name:VASQUEZ, RICHARD VName:LAFFERTY, PATRICK DAddress:13730 SUNFLOWER COURT UNIT #BAddress:3261 SCARLETTA DR.City-St-Zip:WELLINGTON, FL 33414City-St-Zip:RIVIERA BEACH, FL 33404

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: RICHARD VASQUEZ P 05/13/2008