

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000008038

FILED
Oct 09, 2006
Secretary of State

Entity Name: ALLIED CHURCH OF GOD IN CHRIST, INC.

Current Principal Place of Business:

151 NORTH POLK AVENUE
ARCADIA, FL 34266

New Principal Place of Business:

Current Mailing Address:

151 NORTH POLK AVENUE
ARCADIA, FL 34266

New Mailing Address:

FEI Number: 55-0803099

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: ROSA FELTON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FELTON, ROSA
Address: 612 MAPLE ST
City-St-Zip: ARCADIA, FL 34266

Title: VD () Delete
Name: JACKSON, JOANN
Address: 222 S MANATEE AVE
City-St-Zip: ARCADIA, FL 34266

Title: STD () Delete
Name: MITCHELL, ACASHIA
Address: 1288 SW AVOCADO DR
City-St-Zip: ARCADIA, FL 34266

Title: TSD () Delete
Name: MITCHELL, ACASHIA
Address: 1288 SW AVOCADO DR
City-St-Zip: ARCADIA, FL

Title: FS () Delete
Name: RIDEOUT, CHRISTOPHER
Address: 414 SPRING AVE
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
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 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: ROSA FELTON

PD

10/09/2006

Electronic Signature of Signing Officer or Director

Date