

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000000449

FILED
Apr 06, 2009
Secretary of State

Entity Name: CHRIST APOSTOLIC CHURCH (VINYARD OF BLESSING), INC.

Current Principal Place of Business:

1220 S. DIXIE HIGHWAY
HOLLYWOOD, FL 33020

New Principal Place of Business:

Current Mailing Address:

7773 FAIRWAY BLVD
MIRAMAR, FL 33023

New Mailing Address:

11213 MISTY RIDGE WAY
BOYNTON BEACH, FL 33473

FEI Number: 57-1146591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLOWOYEYE, JOHNSON O
1242 NE 109 ST
MIAMI, FL 33161 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: JOHNSON OLOWOYEYE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OLOWOYEYE, JOHNSON O
Address: 1242 NE 109 ST
City-St-Zip: MIAMI, FL 33161

Title: D () Delete
Name: AFOLABI, OLIVIA
Address: 15181 NW 1 ST
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D () Delete
Name: OLAWALE, J.A.
Address: 18620 NW 27 AVE
City-St-Zip: MIAMI, FL 33056

Title: D () Delete
Name: OWDEYE, J. O.
Address: 8157 S. EXCHANGE DR
City-St-Zip: CHICAGO, IL 60617

Title: D () Delete
Name: ALALADE, TIMOTHY
Address: 2077 SW 176TH TR
City-St-Zip: MIRAMAR, FL 33029

Title: () Delete
Name:
Address:
City-St-Zip:

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: D (X) Change () Addition
Name: OWOEYE, J. O.
Address: 8157 S. EXCHANGE DR
City-St-Zip: CHICAGO, IL 60617

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

Title: D () Change (X) Addition
Name: OLOWOYEYE, EMILY
Address: 11213 MISTY RIDGE WAY
City-St-Zip: BOYNTON BEACH, FL 33473

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: EMILY OLOWOYEYE

D

04/06/2009

Electronic Signature of Signing Officer or Director

Date