

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000000594

**FILED**  
**Oct 03, 2005**  
**Secretary of State**

**Entity Name:** FIRST BRAZILIAN CHURCH OF THE EMERALD COAST, INC.

**Current Principal Place of Business:**

362 SAILFISH DR  
DESTIN, FL 32541

**New Principal Place of Business:**

**Current Mailing Address:**

362 SAILFISH DR  
DESTIN, FL 32541

**New Mailing Address:**

**FEI Number:** 11-3663006      **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:**

GLOVASKI, WILSON T  
362 SAILFISH DR  
DESTIN, FL 32541      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: WILSON T GLOVASKI

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: GLOVASKI, WILSON T  
Address: 362 SAILFISH DR  
City-St-Zip: DESTIN, FL 32541

Title: VSD      (X) Delete  
Name: GLOVASKI, IVANI T  
Address: 362 SAILFISH DR  
City-St-Zip: DESTIN, FL 32541

Title: TD      ( ) Delete  
Name: GLOVASKI, VITOR H  
Address: 362 SAILFISH DR.  
City-St-Zip: DESTIN, FL 32541

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: TD      (X) Change ( ) Addition  
Name: DO NASCIMENTO, FRANCISCO S  
Address: 362 SAILFISH DR.  
City-St-Zip: DESTIN, FL 32541

Title: SD      ( ) Change (X) Addition  
Name: GOMES, ALEXANDRE D  
Address: 362 SAILFISH DR.  
City-St-Zip: DESTIN, FL 32541

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: WILSON T GLOVASKI

PD

10/03/2005

Electronic Signature of Signing Officer or Director

Date