

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000000968

**FILED**  
**Oct 09, 2006**  
**Secretary of State**

**Entity Name:** PRAISE INTERNATIONAL WORSHIP AND TRAINING CENTER, INC.

**Current Principal Place of Business:**

PMB 17-7862 W IRLO BRONSON HWY  
KISSIMMEE, FL 34747

**New Principal Place of Business:**

PMB 170-7862 W IRLO BRONSON HWY  
KISSIMMEE, FL 34747

**Current Mailing Address:**

PMB 17-7862 W IRLO BRONSON HWY  
KISSIMMEE, FL 34747

**New Mailing Address:**

PMB 170-7862 W IRLO BRONSON HWY  
KISSIMMEE, FL 34747

**FEI Number:** 43-1996858

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CASH, BETTY L  
PMB 17-7862 W IRLO BRONSON HWY  
KISSIMMEE, FL 34747 US

**Name and Address of New Registered Agent:**

CASH, BETTY L  
PMB 172-7862 W IRLO BRONSON HWY  
KISSIMMEE, FL 34747 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: BETTY CASH

10/09/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: CASH, APOSTLE J  
Address: PMB 17-7862 W IRLO BRONSON HWY  
City-St-Zip: KISSIMMEE, FL 34747

Title: S ( ) Delete  
Name: CASH, BETTY  
Address: PMB 17-7862 W IRLO BRONSON HWY  
City-St-Zip: KISSIMMEE, FL 34747

Title: T ( ) Delete  
Name: ROSS, REBECCA  
Address: 1520 ADDIE AVE  
City-St-Zip: ORLANDO, FL 32818

Title: CFO ( ) Delete  
Name: CASH, JANICE  
Address: PMB172-7862 W. IRLO BRONSON HWY  
City-St-Zip: KISSIMMEE, FL 34747

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: CASH, APOSTLE J L  
Address: PMB 172-7862 W IRLO BRONSON HWY  
City-St-Zip: KISSIMMEE, FL 34747

Title: S (X) Change ( ) Addition  
Name: CASH, BETTY  
Address: PMB 172-7862 W IRLO BRONSON HWY  
City-St-Zip: KISSIMMEE, FL 34747

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: BETTY CASH

S

10/09/2006

Electronic Signature of Signing Officer or Director

Date