

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000003862

FILED
Aug 29, 2014
Secretary of State

Entity Name: LOVE TABERNACLE COGIC, INC.

Current Principal Place of Business:

944 MORSE ST.
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 151016
ALTAMONTE SPRINGS, FL 32715

New Mailing Address:

FEI Number: 51-0461872

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUTTS, RICHARD A
412 MONTICELLO DR.
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

BUTTS, RICHARD A
1103 PINE OAK TRAIL
SANFORD, FL 32773 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: RICHARD A. BUTTS

08/29/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DCEO
Name: BUTTS, RICHARD A
Address: 1103 PINE OAK TRAIL
City-St-Zip: SANFORD, FL 32773 UN

Title: D
Name: HENDERSON, CHARLES
Address: 2428 COURTLAND BLVD.
City-St-Zip: DELTONA, FL 32803

Title: D
Name: WELLS, MOSELLA
Address: 18 LINCOLN AVE.
City-St-Zip: ORLANDO, FL 32810

Title: D
Name: BUTTS, SIMONE
Address: 1103 PINE OAK TRAIL
City-St-Zip: SANFORD, FL 32773 UN

Title: D
Name: HALL, STANLEY
Address: 64 S. EDGEMON AVE.
City-St-Zip: WINTER SPRINGS, FL 32708

I hereby 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 all other like empowered.

SIGNATURE: RICHARD

CEO

08/29/2014

Electronic Signature of Signing Officer or Director

Date