


2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N03000008697 1. Entity Name TRUE BELIEVER CHURCH OF GOD, INC.						FILED 05 APR -6 PM 4:38 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business C/O WILLE E. JENKINS PO BOX 279 PAHOKEE, FL 33476				Mailing Address C/O WILLE E. JENKINS PO BOX 279 PAHOKEE, FL 33476			
2. Principal Place of Business 364 S. Lake Ave Suite, Apt. #, etc.				3. Mailing Address Suite, Apt. #, etc.			
City & State Pahokee FL				City & State Pahokee FL			
Zip 33476		Country Palm		Zip 33476		Country FL	
4. FEI Number 27-0112334				Applied For <input checked="" type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent JENKINS, WILLIE E 120 HOME PL COURT PAHOKEE, FL 33476			
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <i>Willie E. Jenkins</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>				(NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$122.50				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
Make check payable to Florida Department of State				10. OFFICERS AND DIRECTORS			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
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D WILLIAMS, TONY 804 PADGETT CIRCLE PAHOKEE, FL 33476				D BROWN, JIMMY 732 CHERRY ROAD WEST PALM BEACH, FL 33409			
D BRINKLEY, ALEX 5211 STACY STREET #C WEST PALM BEACH, FL 33417				500054204305 05/10/05--01038--011 **122.50			
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