## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N03000009125

FILED Oct 10, 2006 Secretary of State

Entity Nam	e: TABERNACLE DELIVRANCE DE JESUS-CHRIS	ST, INC.	
Current Pri	ncipal Place of Business:	New Principal Place of Busi	ness:
	GE AVENUE CE, FL 34950	505 N. 13TH STREET SUITE #1 FORT PIERCE, FL 34950	
Current Mailing Address:		New Mailing Address:	
	GE AVENUE CE, FL 34950	312 N. 12TH STREET FORT PIERCE, FL 34950	
FEI Number: 13-4285560 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 A	Address of Current Registered Agent:	Name and Address of New I	Registered Agent:
312 NORTH 12TH STREET		ESTIMA, BERACAH PASTOR 312 NORTH 12TH STREET FORT PIERCE, FL 34950 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	E: BERACAH E. MELLON		10/10/2006
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Name: Address:	PD () Delete MELLON, BERACAH E P 312 N. 12TH STREET FORT PIERCE, FL 34950	Title: ( ) Chan Name: Address: City-St-Zip:	ge ( ) Addition
Name: Address:	SD () Delete MENDENHALL, MARIE E 2107 WARE DRIVE WEST PALM BEACH, FL 33409	Title: ( ) Chan Name: Address: City-St-Zip:	ge ( ) Addition
Name: Address:	TD () Delete MELLON, JEAN BERNEX 312 N 12TH STREET FORT PIERCE, FL 34950 US	Title: ( ) Chan Name: Address: City-St-Zip:	ge ( ) Addition

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: BERACAH E. MELLON PD 10/10/2006