2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000004584

FILED Oct 04, 2009 Secretary of State

Entity Name: GRACE HAITIAN TABERNACLE CHURCH, INC.

Current Principal Place of Business: New Principal Place of Business:

6900 SILVER STAR RD 211 ORLANDO, FL 32818

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 680614 P. O. BOX 680614 ORLANDO, FL 32868 P. O. BOX 680614 ORLANDO, FL 32868

FEI Number: 20-1124737 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: Name and Address of New Registered Agent:

THEAGENE, JEAN PASTOR 1770 GLENHAVEN CIR OCOEE, FL 34761 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: JEAN THEAGENE

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 THEAGENE, JEAN, PRESIDENT
 Name:
 THEAGENE, JEAN

 Address:
 1770 GLENHAVEN CIR
 Address:
 1770 GLENHAVEN CIR

 City-St-Zip:
 OCOEE, FL 34761 US
 City-St-Zip:
 OCOEE, FL 34761 US

Title: SECR () Delete Title: () Change () Addition

 Name:
 JEUNE, LENER, SECRETARY
 Name:

 Address:
 6900 SILVER STAR RD, SUITE 211
 Address:

 City-St-Zip:
 ORLANDO, FL 32818 US
 City-St-Zip:

Title: TREA () Delete Title: () Change () Addition

Name:NEREUS, NADESGE, TREASURERName:Address:6900 SILVER STAR RD, SUITE 211Address:City-St-Zip:ORLANDO, FL 32818 USCity-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JEAN THEAGENE PRE 10/04/2009