

# 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000004812

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Entity Name:** PENTECOSTAL TABERNACLE MINISTRIES, INC.

**Current Principal Place of Business:**

13359 RAILROAD STREET  
LIVE OAK, FL 32060

**New Principal Place of Business:**

1221 11TH AVENUE  
WELLBORN, FL 32094

**Current Mailing Address:**

13359 RAILROAD STREET  
LIVE OAK, FL 32060

**New Mailing Address:**

1221 11TH AVENUE  
WELLBORN, FL 32094

**FEI Number:** 14-1913758

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WILSON, DARIN N  
13359 RAILROAD STREET  
LIVE OAK, FL 32060 US

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

WILSON, DARIN N  
1221 11TH AVENUE  
WELLBORN, FL 32094 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:** DARIN N WILSON

02/28/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** WILSON, DARIN N  
**Address:** 1221 11TH AVENUE  
**City-St-Zip:** WELLBORN, FL 32094

**Title:** D  
**Name:** WILSON, DELAINA M  
**Address:** 1221 11TH AVENUE  
**City-St-Zip:** WELLBORN, FL 32094

**Title:** D  
**Name:** WILSON, LEONARD N  
**Address:** 13359 RAILROAD STREET  
**City-St-Zip:** LIVE OAK, FL 32060

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:** DARIN N WILSON

PRES

02/28/2011

Electronic Signature of Signing Officer or Director

Date