2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0400005029

FILED Oct 13, 2009 Secretary of State

Entity Name: PRIMERA IGLESIA PENTECOSTAL DE DEBARY, INC.

Current	Principal Place of Business:	New Principal Place of Business:
101 AND	DMAT DRIVE 102G Y, FL 32713	
Current N	/lailing Address:	New Mailing Address:
	E SPRINGS COURT Y, FL 32713	
n accordar	r: 51-0511377 FEI Number Applied For (nce with s. 607.193(2)(b), F.S., the corporation d Address of Current Registered Agen	did not receive the prior notice.
vanne and	a Address of Current Registered Agen	it. Name and Address of New Registered Agent.
	JOSE A LL SPRINGS COURT Y, FL 32713 US	
	e named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATU	RE: JOSE AQUINO	
	Electronic Signature of Registered	d Agent Date
		d Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
itle: lame: lddress:		
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	S AND DIRECTORS: P () Delete AQUINO, JOSE A 364 SABAL SPRINGS CT	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address:
DFFICER Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: City-St-Zip:	P () Delete AQUINO, JOSE A 364 SABAL SPRINGS CT DEBARRY, FL 32713 VS () Delete AQUINO, HILDA N 364 SABAL SPRINGS CT	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address: Address:	P () Delete AQUINO, JOSE A 364 SABAL SPRINGS CT DEBARRY, FL 32713 VS () Delete AQUINO, HILDA N 364 SABAL SPRINGS CT DEBARRY, FL 32713 T () Delete PABON, BRUNILDA 2841 W COVINGTON DRIVE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-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: HILDA AQUINO VP 10/13/2009