

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000005228

FILED  
Sep 21, 2005  
Secretary of State

**Entity Name:** NEW CREATION CHRIST DELIVERANCE CHURCH, INC.

**Current Principal Place of Business:**

3036 6TH AVE NORTH  
ST PETERSBURG, FL 33713

**New Principal Place of Business:**

**Current Mailing Address:**

3036 6TH AVE NORTH  
ST PETERSBURG, FL 33713

**New Mailing Address:**

**FEI Number:** 75-2999529      **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:**

WORKS, TIMOTHY L SR  
3036 6TH AVE NORTH  
ST PETERSBURG, FL 33713      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: TIMOTHY L WORKS SR.

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD      ( ) Delete  
Name: WORKS, TIMOTHY L SR.  
Address: 3036 6TH AVE NORTH  
City-St-Zip: ST PETERSBURG, FL 33713

Title: APD      (X) Delete  
Name: ISOM, TRAVIS  
Address: 1758 12TH AVE SO  
City-St-Zip: ST PETERSBURG, FL 33712

Title: SD      ( ) Delete  
Name: WORKS, SOPHIA D  
Address: 3036 6TH AVE NORTH  
City-St-Zip: ST PETERSBURG, FL 33713

**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 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 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: TIMOTHY L.WORKS SR.

P/P

09/21/2005

Electronic Signature of Signing Officer or Director

Date