

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000009314

FILED  
Sep 28, 2006  
Secretary of State

**Entity Name:** NEW SHEKINAH FELLOWSHIP MINISTRIES, INC.

**Current Principal Place of Business:**

AT HIS ACADEMY 1259 10TH ST.  
LAKE PARK, FL 33403

**New Principal Place of Business:**

114 E. BLUE HERON BLVD.  
RIVIERA BEACH, FL 33404

**Current Mailing Address:**

P.O. BOX 17023  
WEST PALM BEACH, FL 33416

**New Mailing Address:**

**FEI Number:** 43-2060623      **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:**

GRAY, JANE E  
714 DATE PALM DR.  
LAKE PARK, FL 33403      US

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

GRAY, JANE E  
500 N. CONGRESS #65  
WEST PALM BEACH, FL 33403      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: JANE E. GRAY

09/28/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TRES      ( ) Delete  
Name: GRAY, JANE E  
Address: 714 DATE PALM DR.  
City-St-Zip: LAKE PARK, FL 33403

Title: SEC      ( ) Delete  
Name: LIGHTBOURNE, PATRICIA  
Address: 117 NO. F ST  
City-St-Zip: LAKE WORTH, FL 33460

Title: VP      ( ) Delete  
Name: HALL, SAMANTHA  
Address: 524 S.W. 8TH ST  
City-St-Zip: BELLE GLADE, FL 33430

Title: P      ( ) Delete  
Name: WILSON, LAFAWN  
Address: P.O. BOX 17023  
City-St-Zip: WEST PALM BEACH, FL 33416

**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:

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 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: LAFAWN WILSON

PRES

09/28/2006

Electronic Signature of Signing Officer or Director

Date