

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000000671

FILED
Oct 08, 2007
Secretary of State

Entity Name: TABERNACLE OF HIGHER LEARNING CHRISTIAN CENTER, INC.

Current Principal Place of Business:

1815 2ND AVENUE EAST
BRADENTON, FL

New Principal Place of Business:

1815 2ND AVENUE EAST
BRADENTON, FL 34208

Current Mailing Address:

1815 2ND AVENUE EAST
BRADENTON, FL

New Mailing Address:

1815 2ND AVENUE EAST
BRADENTON, FL 34208

FEI Number: 34-2040070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, LAYON F II
442 OLD MAIN STREET
BRADENTON, FL 34205 US

Name and Address of New Registered Agent:

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: LAYON F. ROBINSON, II

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOHNSON, TEDESII SAMIDA
Address: 4277 66 STREET CIRCLE W
City-St-Zip: BRADENTON, FL

Title: D () Delete
Name: MCELROY, GWENDOLYN
Address: 620 29TH STREET E
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: ROBINSON, LAYON F II
Address: 442 OLD MAIN STREET
City-St-Zip: BRADENTON, FL 34205

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JOHNSON, TEDESII SAMIDA
Address: 4277 66 STREET CIRCLE W
City-St-Zip: BRADENTON, FL 34209

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: TEDESII SAMIDA JOHNSON

D

10/08/2007

Electronic Signature of Signing Officer or Director

Date