

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000006224

FILED
Dec 04, 2006
Secretary of State

Entity Name: PRODIGAL CHRISTIAN CENTER INC.

Current Principal Place of Business:

700 NW 23 TERRACE
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

700 NW 23 TERRACE
POMPANO BEACH, FL 33069

New Mailing Address:

3830 SW DAISY ST
PORT SAINT LUCIE, FL 34953

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

JAVAN, SMITH I
700 NW 23 TERRACE
POMPANO BEACH, FL 33069 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: JAVAN SMITH

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, CINDY
Address: 700 NW 23 TERRACE
City-St-Zip: POMPANO BEACH, FL 33069

Title: V () Delete
Name: LYNCH, ALBERT
Address: 700 NW 23 TERRACE
City-St-Zip: POMPANO, FL 33069, FL 33069

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITH, JAVAN
Address: 3830 SW DAISY
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: V (X) Change () Addition
Name: SMITH, CINDY
Address: 3830 SW DAISY
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: A () Change (X) Addition
Name: LYNCH, ALBERT
Address: 700 NW 23 TERRACE
City-St-Zip: POMPANO, FL 33069

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: JAVAN SMITH

P

12/04/2006

Electronic Signature of Signing Officer or Director

Date