

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N06000008133

**FILED**  
**Mar 29, 2012**  
**Secretary of State**

**Entity Name:** BETHEL OF MT. SINAI HOLY CHURCH OF MAYO, INC.

**Current Principal Place of Business:**

357 PINE STREET  
MAYO, FL 32066

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 526  
MAYO, FL 32066

**New Mailing Address:**

**FEI Number:** 55-0851778

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DEMPS, CAROLYN C  
550 MYRTLE STREET  
PERRY, FL 32347 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:** CAROLYN C DEMPS

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** DEMPS, CAROLYN C  
**Address:** 550 MYRTLE STREET  
**City-St-Zip:** PERRY, FL 32347

**Title:** V  
**Name:** DEMPS, CHESTER H  
**Address:** 550 MYRTLE STREET  
**City-St-Zip:** PERRY, FL 32347

**Title:** S  
**Name:** WOODS, ODESSA O  
**Address:** POST OFFICE BOX 163  
**City-St-Zip:** MAYO, FL 32066

**Title:** T  
**Name:** JACKSON, MARGARITE  
**Address:** POST OFFICE BOX 421  
**City-St-Zip:** MAYO, FL 32066

I hereby 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 all other like empowered.

**SIGNATURE:** CAROLYN C. DEMPS

P

03/29/2012

Electronic Signature of Signing Officer or Director

Date