

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000004931

FILED
Oct 15, 2009
Secretary of State

Entity Name: THE FIRST COMMUNITY CHRISTIAN PENTECOSTAL CHURCH OF GOD, INC.

Current Principal Place of Business:

1877 SOUTH OBT #16
ORLANDO, FL 32805

New Principal Place of Business:

Current Mailing Address:

204 JACKSON ST
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

1877 SOUTH OBT #16
ORLANDO, FL 32805

FEI Number: 20-8052097 **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:

PROVIDENCE, JEAN D
204 JACKSON ST
ALTAMONTE SPRINGS, FL 32701 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: JEAN D PROVIDENCE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PROVIDENCE, JEAN D
Address: 204 JACKSON ST
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D () Delete
Name: MARIE, CHARLES
Address: 1660 W GORE ST
City-St-Zip: ORLANDO, FL 32805

Title: D () Delete
Name: PROVIDENCE, JEAN SAMUEL
Address: 609 ASHFORD OAKS DR #101
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: D () Delete
Name: ERSTNEST, CLAUDE
Address: 223 JACKSON ST
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: D () Delete
Name: DANTES, SORREL
Address: 204 JACKSON STREET
City-St-Zip: ALTAMONTE SPRING, FL 32701

Title: D () Delete
Name: PROVIDENCE, MARIE JOSE
Address: 204 JACKSON STREET
City-St-Zip: ALTAMONTE SPRING, FL 32701

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:

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: JEAN D PROVIDENCE

D

10/15/2009

Electronic Signature of Signing Officer or Director

Date