

2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07504

FILED
Feb 04, 2010
Secretary of State

Entity Name: HOUSE OF GOD MIRACLE TEMPLE OF WEST PALM BEACH, INC.-APOSTOLIC FAITH

Current Principal Place of Business:

502 SAPODILLA AVE.
WEST PALM BEACH, FL 33402

New Principal Place of Business:

Current Mailing Address:

C/O PASTOR ANNIE L. TURNER
P.O. BOX 1145
WEST PALM BEACH, FL 33402

New Mailing Address:

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:

Name and Address of New Registered Agent:

MAASS, ROBB R ESQ.
340 ROYAL POINCIANA WAY
SUITE 321
PALM BEACH, FL 33480 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: ROBB R MAASS ESQ

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: TURNER, ANNIE LAURA
Address: P O BOX 1145
City-St-Zip: WEST PALM BEACH, FL 33402

Title: S
Name: TURNER-STOKES, SHEILA P
Address: 1562 LAKE CRYSTAL DR.
City-St-Zip: ROYAL PALM BEACH, FL 33411

Title: T
Name: TURNER, DANIEL M
Address: P O BOX 1145
City-St-Zip: WEST PALM BEACH, FL 33480

Title: D
Name: STOKES, ANTHONY
Address: 1562 LAKE CRYSTAL DR.
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: ANNIE TURNER

P

02/04/2010

Electronic Signature of Signing Officer or Director

Date