

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000001797

FILED  
Dec 18, 2009  
Secretary of State

**Entity Name:** NEW HOPE TABERNACLE OF JOY DELIVERANCE MINISTRIES INC.

**Current Principal Place of Business:**

3717 E DELEUIL AVE  
TAMPA, FL 33610

**New Principal Place of Business:**

2705 E. HANNA AVE  
TAMPA, FL 33610

**Current Mailing Address:**

3717 E DELEUIL AVE  
TAMPA, FL 33610

**New Mailing Address:**

**FEI Number:** 59-3605535      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

SINGLETARY-SCOTT, DEBRA  
3717 E DELEUIL AVE  
TAMPA, FL 33610      US

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

SINGLETARY-SCOTT, DEBRA M  
3717 E DELEUIL AVE  
TAMPA, FL 33610      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: DEBRA SINGLETARY-SCOTT

12/18/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP      ( ) Delete  
Name: SCOTT, HAROLD R  
Address: 3717 E DELEUIL AVE  
City-St-Zip: TAMPA, FL 33610

Title: DVST      ( ) Delete  
Name: SINGLETARY-SCOTT, DEBRA  
Address: 3717 E DELEUIL AVE  
City-St-Zip: TAMPA, FL 33610

Title: D      ( ) Delete  
Name: TAYLOR, SHARECA  
Address: 3717 E DELEUIL AVE  
City-St-Zip: TAMPA, FL 33610

Title: D      ( ) Delete  
Name: DUKES, YORK  
Address: 6708 N 24TH ST  
City-St-Zip: TAMPA, FL 33610

Title: D      ( ) Delete  
Name: KNIGHT, KATURA  
Address: 909 E YUKON AVE  
City-St-Zip: TAMPA, FL 33604

**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: D      (X) Change ( ) Addition  
Name: EUGENE, AKINES  
Address: 3702 E. DELEUIL AVE  
City-St-Zip: TAMPA, FL 33610

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: DEBRA SINGLETARY-SCOTT

SEC.

12/18/2009

Electronic Signature of Signing Officer or Director

Date