

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N12000003412

FILED  
Aug 21, 2014  
Secretary of State

**Entity Name:** RESTORATION CHRISTIAN LIFE CHURCH OF GOD OF PROPHECY, INC.

**Current Principal Place of Business:**

2500 EAST MAIN STREET  
PAHOKEE, FL 33476

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 520  
PAHOKEE, FL 33476

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

CHRISTIAN, LINNETTE D  
1721 N 54TH AVENUE  
HOLLYWOOD, FL 33021 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: LINNETTE D CHRISTIAN

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CHRISTIAN, LINNETTE D  
Address: 1721 N 54TH AVENUE  
City-St-Zip: HOLLYWOOD, FL 33021

Title: AP  
Name: DAVIS, JANICE M  
Address: 8888 ELDORADO DRIVE  
City-St-Zip: PAHOKEE, FL 33476

Title: T  
Name: RICHARDSON, DAWN  
Address: 577 SW 10TH STREET  
City-St-Zip: BELLE GLADE, FL 33430

Title: AT  
Name: DAVIS, ALLAN  
Address: 8888 ELDORADO DRIVE  
City-St-Zip: PAHOKEE, FL 33476

Title: FD  
Name: BARNES, HUBERT  
Address: 925 NW 167 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33028

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: LINNETTE D CHRISTIAN

P

08/21/2014

Electronic Signature of Signing Officer or Director

Date