

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N12000005654

FILED  
Oct 23, 2014  
Secretary of State

**Entity Name:** GREATER WORKSMINISTRY INSTITUTE INCORPORATED

**Current Principal Place of Business:**

3179 W ATLANTIC BLVD  
SUITE # 35  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

3179 W ATLANTIC BLVD  
SUITE # 35  
POMPANO BEACH, FL 33069

**New Mailing Address:**

**FEI Number:** 65-1037802

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MAXWELL, DENNIS  
7209 SPORTSMAN DRIVE  
NORTH LAUDERDALE, FL 33068 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: DENNIS MAXWELL

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LESANE, ANGELA  
Address: 7209 SPORTSMAN DRIVE  
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: V  
Name: HUDSON, CYNTHIA  
Address: 3179 W ATLANTIC BLVD # 35  
City-St-Zip: POMPANO BEACH, FL 33069

Title: D  
Name: DANIELS, ASHMER  
Address: 8803 W SAMPLE RD APT # W3  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: S  
Name: MATHIS, FRAZIER  
Address: 3465 PINEWALK DRIVE NORTH # APT 102  
City-St-Zip: MARGATE, FL 33063

Title: T  
Name: SPANN, VANESSA  
Address: 906 NW 24TH AVE  
City-St-Zip: FT LAUDERDALE, FL 33311

Title: D  
Name: JACKSON, MALETTE  
Address: 550 PURDY LANE APT B102  
City-St-Zip: PALM SPRING, FL 33461

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: ANGELA LESANE MAXWELL

PRES

10/23/2014

Electronic Signature of Signing Officer or Director

Date