2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N16566

FILED Oct 10, 2006 Secretary of State

Entity Name: CHRIST TABERNACLE MISSIONARY BAPTIST CHURCH, INCORPORATED **Current Principal Place of Business: New Principal Place of Business:** 2335 DAVIS STREET JACKSONVILLE, FL 32209 **Current Mailing Address: New Mailing Address:** 2335 DAVIS STREET JACKSONVILLE, FL 32209 FEI Number: 59-3021197 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: IVEY, TERRENCE L ESQ 1650 ART MUSEUM DRIVE STE 17 JACKSONVILLE, FL 32207 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: TERRENCE IVEY Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition JOHNSON, WALTER JOHNSON, TIMOTHY Name: Name: 6637 IOSA DRIVE Address: 2335 DAVIS STREET Address: City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: JACKSONVILLE, FL 32208 Title: DT () Delete Title: () Change () Addition BYRD, JAMES Name: Name: Address: 6330 RESTLAWN DR. Address: City-St-Zip: JACKSONVILLE, FL 32208 City-St-Zip: Title: () Delete Title: () Change () Addition CHATMAN, ELLIOTT Name: Name: Address: 2125 N PEARL ST Address: City-St-Zip: JACKSONVILLE, FL 32206 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: NEWMAN, PAUL Name: NEWMAN, PAUL 3017 SATURN AVE Address: 3017 SATURN AVE Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: JACKSONVILLE, FL 32209 Title: () Delete Title: () Change (X) Addition STEPHENS, JOSEPH Name: Name: 2125 N PEARL STREET Address: Address: City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32206

I hereby certify that the information supplied with this filing does not qualify for the 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: PAUL NEWMAN D 10/10/2006