2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 22, 2004
Secretary of State

DOCUMENT# N18949

Entity Name: HIGHLAND MISSIONARY BAPTIST CHURCH OF TAMPA, INC.

Current Principal Place of Business:

3410 E. NORTH STREET
TAMPA, FL 33610

New Principal Place of Business:

Current Mailing Address:

3410 E. NORTH STREET
TAMPA, FL 33610

New Mailing Address:

FEI Number: 59-2953813 **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:

DAVIS, BRENDA J
3912 E HANNA AVE
TAMPA, FL 33610 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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: HERDS, MARCELLUS,
Address: 3417 E HANNA ST
City-St-Zip: TAMPA, FL

Title: D ( ) Delete
Name: WADE, MILTON,
Address: 4511 WEBSTER STREET
City-St-Zip: TAMPA, FL

Title: T/S ( ) Delete
Name: DAVIS, BRENDA J
Address: 3912 E HANNA AVE
City-St-Zip: TAMPA, FL 33610

Title: D ( ) Delete
Name: MORGAN, JAMES
Address: 1123 FOGGY RIDGE PKWY
City-St-Zip: LUTZ, FL 33549

Title: C ( ) Delete
Name: DAVIS, DWIGHT
Address: 3912 E HANNA AVE
City-St-Zip: TAMPA, FL 33610

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: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MILTON WADE D 10/22/2004
Electronic Signature of Signing Officer or Director — Date