

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N21079

FILED
Nov 21, 2005
Secretary of State

Entity Name: SILVER GLYN BAPTIST CHURCH, INC.

Current Principal Place of Business:

115 ARLINGTON ROAD NORTH
JACKSONVILLE, FL 32211

New Principal Place of Business:

Current Mailing Address:

115 ARLINGTON ROAD NORTH
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 59-1091468 **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:

WILLIS, NORMAN L
1715 HOLLY OAKS LAKE RD. W.
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

WILLIS, NORMAN L PD
1715 HOLLY OAKS LAKE RD. W.
JACKSONVILLE, FL 32225 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: NORMAN L WILLIS

11/21/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WILLIS, NORMAN
Address: 1715 HOLLY OAK LAKE RD. W.
City-St-Zip: JACKSONVILLE, FL

Title: TD () Delete
Name: WILLIS, JOYCE
Address: 1715 HOLLY OAKS LAKE RD W
City-St-Zip: JACKSONVILLE, FL 32225

Title: SD () Delete
Name: HARTLEY, GLORIA
Address: 725 TREKKER ST
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILLIS, NORMAN
Address: 1715 HOLLY OAKS LAKE RD. W.
City-St-Zip: JACKSONVILLE, FL

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: NORMAN L WILLIS

PD

11/21/2005

Electronic Signature of Signing Officer or Director

Date