

# **2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N26367

**FILED**  
**Feb 26, 2013**  
**Secretary of State**

**Entity Name:** PRAISE TEMPLE DELIVERANCE CENTER, INC.

**Current Principal Place of Business:**

1010 BRITTS LANE  
BARTOW, FL 33830 US

**New Principal Place of Business:**

**Current Mailing Address:**

4104 MAYFAIR WAY  
LAKELAND, FL 33812

**New Mailing Address:**

**FEI Number:** 02-0683908

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

WATSON, WILLIE LEE  
4104 MAYFAIR WAY  
LAKELAND, FL 33812 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: WATSON, WILLIE LEE

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WATSON, WILLIE LEE  
Address: 4104 MAYFAIR WAY  
City-St-Zip: LAKELAND, FL 33812

Title: D  
Name: HARRIS, JOHNNIE LEE  
Address: 2863 DUDLEY DRIVE  
City-St-Zip: BARTOW, FL

Title: D  
Name: GASKIN, JAMIE W  
Address: 5592 MOON VALLEY DR  
City-St-Zip: LAKELAND, FL 33812 US

Title: D  
Name: ANDERSON, WILLIE  
Address: 2933 DUDLEY DR  
City-St-Zip: BARTOW, FL 33830

Title: D  
Name: WATSON, VIVIAN D  
Address: 4104 MAYFAIR WAY  
City-St-Zip: LAKELAND, FL 33812 US

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: ANDERSON, WILLIE

D

02/26/2013

Electronic Signature of Signing Officer or Director

Date