2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 05, 2009
Secretary of State

DOCUMENT# N48492

Entity Name: TRUE FAITH MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

1890 N.W. 47 TERR
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

1890 N.W. 47 TERR
MIAMI, FL 33142

New Mailing Address:

FEI Number: 65-0396674 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

FAIR, JOHN M
1650 NW 124 ST
MIAMI, FL 33167 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: REV. JOHN M. FAIR
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: FAIR, JOHN M
Address: 1650 NW 124TH STREET
City-St-Zip: MIAMI, FL 33167

Title: T ( ) Delete
Name: WILLIAMS, EMMIT
Address: 4250 NW 168TH TERRACE
City-St-Zip: MIAMI, FL

Title: S ( ) Delete
Name: WILLIAMS, CARRIE
Address: 4250 NW 168TH TERRACE
City-St-Zip: MIAMI, FL

Title: T ( ) Delete
Name: WILLIAMS, EMMETT
Address: 4250 NW 168 TERR
City-St-Zip: MIAMI, FL 33055

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:

I hereby certify that the information supplied with this filing does not qualify 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: JOHN M. FAIR REV 11/05/2009
Electronic Signature of Signing Officer or Director — Date