

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N93000000294

FILED
Nov 10, 2009
Secretary of State

Entity Name: EAST FLORIDA DISTRICT PRIMITIVE BAPTIST ASSOCIATION, INC.

Current Principal Place of Business:

3950 JUANITA AVE.
FORT PIERCE, FL 34950 US

New Principal Place of Business:

Current Mailing Address:

1730 ECHO LAKE DRIVE
WEST PALM BEACH, FL 33407 US

New Mailing Address:

FEI Number: 65-0387054 **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:

HENDLEY, CHARLES L
2201 SAN DIEGO AVE
FORT PIERCE, FL 34446 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: SB

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DUKE, KENNETH A
Address: 15893 S. W. 52ND STREET
City-St-Zip: MIRAMAR, FL 33027

Title: SD () Delete
Name: CHESTER, JAMES
Address: 1730 ECHO LAKE DR.
City-St-Zip: WEST PALM BEACH, FL

Title: TD () Delete
Name: MCCARTY, MITCHELL
Address: 2102 AVENUE O
City-St-Zip: FORT PIERCE, FL

Title: D () Delete
Name: JONES, PAYTON
Address: 1054 REVILLA LANE
City-St-Zip: ROCKLEDGE, FL

Title: VD () Delete
Name: HENDLEY, CHARLES L
Address: 2201 SAN DIEGO AVENUE
City-St-Zip: FORT PIERCE, FL 34946

Title: SD () Delete
Name: INGRAHAM, CHRIS
Address: 15321 SW 46TH CT
City-St-Zip: MIRAMAR, FL 33027

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:

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: SABRINA BOUIE

MS.

11/10/2009

Electronic Signature of Signing Officer or Director

Date