

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 JAN 10 PM 2:23

DOCUMENT # N94000002434

1. Entity Name
FREE PENTECOST CHURCH OF JESUS OF DELAND,
INC.



Principal Place of Business
1918 NEWMARK DRIVE
DELTONA, FL 32738 US

Mailing Address
1918 NEWMARK DRIVE
DELTONA, FL 32738 US

REINSTATEMENT 04-05



2. Principal Place of Business

3. Mailing Address

Deltona Fl.
Suite, Apt. #, etc.

Suite, Apt. #, etc.

11012004 REIN-NP

CR2E099 (6/04)

City & State
Deltona Fl.

City & State

4. FEI Number
59-3127575

Applied For
Not Applicable

Zip Country
32738 Volusia

Zip Country

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HENRY, ZECHARIAH
1918 NEWMARK DRIVE
DELTONA, FL 32738

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ZECHARIAH HENRY
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1-7-05

FILE NOW!!! FEE IS \$236.25
After January 1, 2005, Fee will be \$297.50

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME HENRY, LEROY
STREET ADDRESS %487 W BERESFORD ROAD
CITY-ST-ZIP DELAND, FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME HENRY, CAROLYN
STREET ADDRESS 1918 NEWMARK DRIVE
CITY-ST-ZIP DELTONA, FL 32738

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME HENRY, ZACHARIAH
STREET ADDRESS 1918 NEWMARK DRIVE
CITY-ST-ZIP DELTONA, FL 32738

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Zechariah Henry
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-7-05 386-789-2800