

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 28, 2008
Secretary of State**

DOCUMENT# N95000006046

Entity Name: NEW SAINT PAUL MISSIONARY BAPTIST CHURCH OF MIAMI, FLORIDA, INC.

Current Principal Place of Business:

4757 NW 2ND AVE
MIAMI, FL 33127

New Principal Place of Business:

Current Mailing Address:

840 N.W. 199 STREET
MIAMI, FL 33169

New Mailing Address:

FEI Number: 59-0884031 **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:

JONES, JERRY
840 NW 199 ST
MIAMI, FL 33169 US

Name and Address of New Registered Agent:

JONES, JERRY SR
840 NW 199 ST
MIAMI, FL 33169 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: JERRY JONES SR

10/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOHNSON, ROOSEVELT REV.
Address: 254 NW 43RD STREET
City-St-Zip: MIAMI, FL 33127

Title: TD () Delete
Name: JONES, JERRY SR
Address: 840 N.W. 199 STREET
City-St-Zip: MIAMI, FL 33169

Title: D () Delete
Name: PRUDENT, LONNIE
Address: 16198 NE 9TH PLACE
City-St-Zip: MIAMI, FL 33162

Title: D () Delete
Name: ROBINSON, MATTIE
Address: 15840 BUNCHE PARK SCH DR
City-St-Zip: MIAMI GARDENS, FL 33054

Title: D () Delete
Name: BANKS, CHRISTINA
Address: 2470 N.W. 140 STREET
City-St-Zip: OPA LOCKA, FL 33054

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:

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: JERRY JONES SR

R A

10/28/2008

Electronic Signature of Signing Officer or Director

Date