

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N96000000417

1. Entity Name
BELIEVER'S TEMPLE OF CHRIST FULL GOSPEL
CHURCH, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 SEP 22 PH 2:07

Principal Place of Business
8036 N.W. 10TH COURT
MIAMI, FL 33150 US

Mailing Address
5435 NW 182 ST
MIAMI, FL 33055 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

08302008 REIN-NP

CR2E099 (1/07)

4. FEI Number
65-0637738

Applied For
Not Applicable

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

THOMAS, WILLIE A
5485 NW 182 ST
MIAMI, FL 33055

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

Willie Thomas

9/8/08

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW! FEE IS \$122.50

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CD THOMAS, WILLIE A 5435 NW 182 ST MIAMI, FL 33055	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TT ANDREWS, NELSON 13000 W GOLF DR MIAMI, FL 33167	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AFS SMITH, ATTIE 3871 N.W. 172ND TERR MIAMI, FL 33055	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ANDREWS, SANDRA 13000 W. GOLF DRIVE MIAMI, FL 33167	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T THOMAS, DORIS I 5435 NW 182 ST. OPA LOCKA, FL 33055	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary JUSTINE YOUNG 1830 NW 51th MIAMI, FL 33150	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AFS Darlene Lewis 360 SIBBAD AVE MIAMI, FL 33054	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	200136246612 09/23/08--01016--013 **122.50	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Willie Thomas
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/8/08

786-486-4633
305-621-2285

Date

Daytime Phone #