

2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000002157

FILED
Mar 14, 2014
Secretary of State

Entity Name: "THE END TIME MINISTRY HOUSE OF DELIVERANCE, CORPORATION"

Current Principal Place of Business:

1416 WEST 16TH STREET
JACKSONVILLE, FL 32209

New Principal Place of Business:

1416 WEST 16TH STREET
JACKSONVILLE, FL 32209 UN

Current Mailing Address:

2046 DOCTOR ROY BAKER ST.
JACKSONVILLE, FL 32209

New Mailing Address:

FEI Number: 59-3369641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRONSON, MARY C
2046 DOCTOR ROY BAKER ST.
JACKSONVILLE, FL 32209 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: MARY BRONSON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BROWDER, ROCHESTER
Address: 6403 MITFORD RD
City-St-Zip: JACKSONVILLE, FL 32210

Title: VPD
Name: BRONSON, MARY C
Address: 2046 DOCTOR ROY BAKER ST.
City-St-Zip: JACKSONVILLE, FL 32209

Title: D
Name: WHALEY, JULIE Y
Address: 4437 JANA LANE EAST
City-St-Zip: JACKSONVILLE, FL 32210

Title: D
Name: TYES, MINNIE L
Address: 2104 WOLL RIDGE RD., APT. 74
City-St-Zip: MOBILE, AL 36612

Title: S
Name: MCKIBBEN, DEREK
Address: 2046 DOCTOR ROY BAKER ST.
City-St-Zip: JACKSONVILLE, FL 32209

I hereby 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 all other like empowered.

SIGNATURE: DEREK MCKIBBEN

S

03/14/2014

Electronic Signature of Signing Officer or Director

Date