

**2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 01, 2010  
Secretary of State**

DOCUMENT# N96000003401

**Entity Name:** EVANGELICAL POWER MINISTRY INC.

**Current Principal Place of Business:**

140 PERRY AVENUE  
GREENACRES, FL 33463 US

**New Principal Place of Business:**

**Current Mailing Address:**

2159 PORTLAND AVE  
WELLINGTON, FL 33414 US

**New Mailing Address:**

**FEI Number:** 65-0676973      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LAFORTUNE, JEAN C  
2159 PORTLAND AVENUE  
WELLINGTON, FL 33414 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: JEAN C. LAFORTUNE

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: LAFORTUNE, JEAN C REV  
Address: 2159 PORTLAND AVE  
City-St-Zip: WELLINGTON, FL 33414 US

Title: DS  
Name: CATO, MIRIAM L  
Address: 3552 MAHOGANY WAY  
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: DT  
Name: JEAN BAPTISTE, MARK  
Address: 2244 RIDGEWOOD CIRCLE  
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: MD  
Name: LAFORTUNE, PIERRE A  
Address: 2159 PORTLAND AVE.  
City-St-Zip: WELLINGTON, FL 33414

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: JEAN LAFORTUNE

PRES

10/01/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date