

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000004435

FILED  
Jan 06, 2006  
Secretary of State

**Entity Name:** TRUE FAITH GREATER NEW TESTAMENT CHURCH INC.

**Current Principal Place of Business:**

1630 NW 2ND AVE  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

1630 NW 2ND AVE  
POMPANO BEACH, FL 33060

**New Mailing Address:**

**FEI Number:** 65-0382316      **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:**

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

MOTON, NATHANIEL SR  
1630 N.W. 2ND AVE  
POMPANO BEACH, FL 33060 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: DELORIS JAMES

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MOTON, NATHANIEL SR  
Address: 1630 N.W. 2ND  
City-St-Zip: POMPANO BEACH, FL 33060

Title: V ( ) Delete  
Name: COOPER, STEPHON  
Address: 1061 N.W. 23RD TERR  
City-St-Zip: FT LAUDERDALE, FL 33311

Title: T ( ) Delete  
Name: JAMES, WILLIE F SR  
Address: 2720 N.W. 9TH COURT  
City-St-Zip: POMPANO BEACH, FL 33069

Title: DS ( ) Delete  
Name: JAMES, DELORIS  
Address: 2720 NW 9 COURT  
City-St-Zip: POMPANO BEACH, FL 33069

**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:

I hereby certify that the information supplied with this filing does not qualify for the 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: DELORIS JAMES

DS

01/06/2006

Electronic Signature of Signing Officer or Director

Date