## 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N97000004658

FILED Oct 26, 2005 Secretary of State

Entity Name: TRUE PRAISE INTERDENOMINATIONAL MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

EMERSON OFFICE SUITES

4940 EMERSON STREET, STE. 125

JACKSONVILLE, FL 32218

JACKSONVILLE, FL 32207

Current Mailing Address:

JACKSONVILLE, FL 32207

EMERSON OFFICE SUITES 10971 APPLE BLOSSOM TRL. E 4940 EMERSON STREET, STE. 125 JACKSONVILLE, FL 32218

FEI Number: 59-3462740 FEI Number Applied For ( ) FEI Number Not Applicable ( )

licable ( ) 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:

HILL, JIMMY L HILL, JIMMIE L

4940 EMERSON STREET, STE. 125

JACKSONVILLE, FL 32207 US

10971 APPLE BLOSSOM TRL. E

JACKSONVILLE, FL 32218 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.

**New Mailing Address:** 

SIGNATURE: JIMMIE HILL 10/26/2005

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 HILL, JIMMY L
 Name:
 HILL, JIMMIE L

 Address:
 2602 SANDUSKY AVE E
 Address:
 10971 APPLE BLOSSOM TRL E

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:
 JACKSONVILLE, FL 32218

Title: VP ( ) Delete Title: ( ) Change ( ) Addition Name: HILL, AARON Name:

 Name:
 HILL, AARON
 Name:

 Address:
 12865 CAPTIRE CT.
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:

Title: ST () Delete Title: ST (X) Change () Addition

Name: HILL, VALARIE J Name: HILL, VALERIE J

 Address:
 2602 SANDUSKY AVE E
 Address:
 10971 APPLE BLOSSOM TRL E

 City-St-Zip:
 JACKSONVILLE, FL 32216
 City-St-Zip:
 JACKSONVILLE, FL 32218

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 STAFFORD, LAWRENCE C
 Name:

 Address:
 3334-1 BILLS ROAD
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32207
 City-St-Zip:

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 WILLIAMS, ĠARY C
 Name:

 Address:
 5312 HERONVIEW DR
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32257
 City-St-Zip:

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MADISON, MICHAEL
 Name:

 Address:
 3933 HICKORY GROVE DR
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32277
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: VALERIE HILL ST 10/26/2005