

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000006652

FILED
Jan 08, 2009
Secretary of State

Entity Name: GREATER NEW BIRTH MISSIONARY BAPTIST CHURCH, INC.

Current Principal Place of Business:

195 TALLULAH AVE
JACKSONVILLE, FL 32208

New Principal Place of Business:

Current Mailing Address:

195 TALLULAH AVE
JACKSONVILLE, FL 32208

New Mailing Address:

FEI Number: 31-1637938 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:

KING, PAMELA
873 CHALMET LANE
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.

SIGNATURE: PAMELA KING

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HARRIS, BOBBY
Address: 1484 WEST 10TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: DP () Delete
Name: KING, PAMELA
Address: 873 CHALMET LANE
City-St-Zip: JACKSONVILLE, FL 32218

Title: D () Delete
Name: BUGGS, CHARLIE
Address: 7220 PICKETT ROAD
City-St-Zip: JACKSONVILLE, FL 32208

Title: D () Delete
Name: SAMPSON, ATHER
Address: 1007 E 5TH STREE
City-St-Zip: JACKSONVILLE, FL 32206

Title: DV () Delete
Name: JACKSON, JIM
Address: 6110 DUNMIRE AVE
City-St-Zip: JACKSONVILLE, FL 32219

Title: D () Delete
Name: BUGGS, VICKY
Address: 7220 PICKETT ROAD
City-St-Zip: JACKSONVILLE, FL 32208

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:

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 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: PAMELA KING

DP

01/08/2009

Electronic Signature of Signing Officer or Director

Date