

**2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N99000003439

**FILED**  
**Oct 13, 2004**  
**Secretary of State****Entity Name:** TRUE FAITH OUTREACH DEVELOPMENT, INC.**Current Principal Place of Business:**1630 N.W. 2ND. AVE.  
POMPAÑO BEACH, FL 33060**New Principal Place of Business:****Current Mailing Address:**1630 N.W. 2ND. AVE.  
POMPAÑO BEACH, FL 33060**New Mailing Address:**PO BOX 697  
POMPAÑO BEACH, FL 33061**FEI Number:** 65-0924438      **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:**MOTON, NATHANIEL  
1630 N.W. 2ND. AVE.  
POMPAÑO BEACH, FL 33060      US**Name and Address of New Registered Agent:**GOODRUM, ELLEN RA  
PO BOX 697  
POMPAÑO BEACH, FL 33061      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: ELLEN GOODRUM

10/13/2004

\_\_\_\_\_  
Electronic Signature of Registered Agent\_\_\_\_\_  
Date**OFFICERS AND DIRECTORS:****Title:** P      ( ) Delete  
**Name:** MOTON, NATHANIEL  
**Address:** 1630 N.W. 2ND. AVE.  
**City-St-Zip:** POMPAÑO BEACH, FL 33060**Title:** S      ( ) Delete  
**Name:** JAMES, DELORIS  
**Address:** 2720 N.W. 9TH COURT  
**City-St-Zip:** POMPAÑO BEACH, FL 33069**Title:** T      ( ) Delete  
**Name:** PARRISH, WALTER  
**Address:** 2724 NW 2ND STREET  
**City-St-Zip:** POMPAÑO 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:** T      (X) Change ( ) Addition  
**Name:** COOPERH, STEPHAN  
**Address:** 1061 NW 23RD TERRACE  
**City-St-Zip:** FORT LAUDERDALE, FL 33311

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: ELLEN GOODRUM

RA

10/13/2004

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