2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 712810

FILED Nov 12, 2008 Secretary of State

Entity Name: TABERNACLE CHURCH OF DELIVERENCE, INC.

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

2907 AVENUE S

FORT PIERCE, FL 34947

Current Mailing Address: New Mailing Address:

1509 FLORIDA AVENUE 2907 AVENUE S

FORT PIERCE, FL 34950 FORT PIERCE, FL 34947

FEI Number: 65-0790301 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:

GORDON, DOROTHY L
1509 FLORIDA AVENUE
GORDON, DOROTHY L
1920 N. 44TH STREET

FORT PIERCE, FL 34947 US FORT PIERCE, FL 34947 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: DOROTHY L. GORDON 11/12/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GORDON, HARRY
 Name:
 GORDON, HARRY

 Address:
 1509 FLORIDA AVENUE
 Address:
 1920 N. 44TH STREET

 City-St-Zip:
 FORT PIERCE, FL 34950
 City-St-Zip:
 FORT PIERCE, FL 34947

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

 Name:
 GORDON, DOROTHY L
 Name:
 GORDON, DOROTHY L

 Address:
 1509 FLORIDA AVENUE
 Address:
 1920 N. 44TH STREET

 City-St-Zip:
 FORT PIERCE, FL 34950
 City-St-Zip:
 FORT PIERCE, FL 34947

Title: S () Delete Title: () Change () Addition

 Name:
 JACY, QUEEN
 Name:

 Address:
 1211 N. 25 ST.
 Address:

 City-St-Zip:
 FT. PIERCE, FL 34950
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 GORDON, LARRY
 Name:

 Address:
 112 SOUTH 17TH STREET
 Address:

 City-St-Zip:
 FT. PIERCE, FL 34950
 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: DOROTHY L. GORDON VD 11/12/2008