

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 10, 2006
Secretary of State**

DOCUMENT# N03000009125

Entity Name: TABERNACLE DELIVRANCE DE JESUS-CHRIST, INC.

Current Principal Place of Business:

1313 ORANGE AVENUE
FORT PIERCE, FL 34950

New Principal Place of Business:

505 N. 13TH STREET
SUITE #1
FORT PIERCE, FL 34950

Current Mailing Address:

1313 ORANGE AVENUE
FORT PIERCE, FL 34950

New Mailing Address:

312 N. 12TH STREET
FORT PIERCE, FL 34950

FEI Number: 13-4285560 **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:

ESTIMA, BERACHA PASTOR
312 NORTH 12TH STREET
FORT PIERCE, FL 34950 US

Name and Address of New Registered Agent:

ESTIMA, BERACAH PASTOR
312 NORTH 12TH STREET
FORT PIERCE, FL 34950 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: BERACAH E. MELLON 10/10/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MELLON, BERACAH E P
Address: 312 N. 12TH STREET
City-St-Zip: FORT PIERCE, FL 34950

Title: SD () Delete
Name: MENDENHALL, MARIE E
Address: 2107 WARE DRIVE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: TD () Delete
Name: MELLON, JEAN BERNEX
Address: 312 N 12TH STREET
City-St-Zip: FORT PIERCE, FL 34950 US

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:

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: BERACAH E. MELLON PD 10/10/2006
Electronic Signature of Signing Officer or Director Date