

# 2014 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000011140

**FILED**  
**Oct 07, 2014**  
**Secretary of State**

**Entity Name:** TABERNACLE OF PRAISE DELIVERANCE CHURCH MINISTRY, INC.

**Current Principal Place of Business:**

43 DREW ELLIS LANE  
QUINCY, FL 32351

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 2251  
QUINCY, FL 32351

**New Mailing Address:**

**FEI Number:** 42-1647309

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FRISON, ARDELLA B  
330 HOLT LANE  
QUINCY, FL 32351 US

**Name and Address of New Registered Agent:**

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: ARDELLA B. FRISON

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FRISON, ARDELLA  
Address: 330 HOLT LANE  
City-St-Zip: QUINCY, FL 32351

Title: VP  
Name: FRISON, ARCHIE LEE  
Address: 330 HOLT LANE  
City-St-Zip: QUINCY, FL 32351

Title: S  
Name: FRISON, ARPRYLLA  
Address: 330 HOLT LANE  
City-St-Zip: QUINCY, FL 32351

Title: T  
Name: BOSTICK, AMOS  
Address: 80 NORTH MARTY ST  
City-St-Zip: QUINCY, FL 32351

Title: S  
Name: FRISON, JASMINE  
Address: 330 HOLT LANE  
City-St-Zip: QUINCY, FL 32351

I hereby 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 all other like empowered.

SIGNATURE: ARDELLA B. FRISON

P

10/07/2014

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

\_\_\_\_\_  
Date