2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 23, 2009
Secretary of State

DOCUMENT# 733764

Entity Name: PORT ST. LUCIE CHRISTIAN CHURCH, INC.

Current Principal Place of Business:

1420 SE FLORESTA DR
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

1420 SE FLORESTA DR
PORT ST. LUCIE, FL 34983

New Mailing Address:

FEI Number: 05-0023600 **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:

BLAIR, ROBERT H
107 SW RIDGECREST DR
PORT SAINT LUCIE, FL 34953 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: ROBERT H BLAIR
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: E ( ) Delete
Name: BLAIR, BOB
Address: 107 SE RIDGECREST DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: E ( ) Delete
Name: BILLS, MIKE
Address: 1612 MISTLETOE ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: E ( ) Delete
Name: DULOM, DON
Address: 395 SE CROSSPOINT DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: E ( ) Delete
Name: SLONE, WINFORD
Address: 902 HERON AVENUE
City-St-Zip: FT. PIERCE, FL 34982

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: E (X) Change ( ) Addition
Name: BILLS, MICHAEL
Address: 1612 MISTLETOE ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: E ( ) Change (X) Addition
Name: VERR, JERRY
Address: 7135 HAWK'S VIEW TRAIL
City-St-Zip: PORT ST. LUCIE, FL 34986

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: MICHAEL BILLS ELDE 10/23/2009
Electronic Signature of Signing Officer or Director — Date