

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Nov 25, 2009
Secretary of State**

DOCUMENT# N93000003070

Entity Name: CHRISTIAN EDIFICATION CONFERENCE, INC.

Current Principal Place of Business:

RT 1 HWY 90 WEST
3039 EDIFICATION DR
COTTONDALE, FL 32431 US

New Principal Place of Business:

Current Mailing Address:

RT 1 HWY 90 WEST
3039 EDIFICATION DR
COTTONDALE, FL 32431 US

New Mailing Address:

FEI Number: 59-3199386 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, JACKIE
3039 EDIFICATION DR
COTTONDALE, FL 32431 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: JACKIE JOHNSON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOHNSON, JACKIE
Address: 3039 EDIFICATION DR.
City-St-Zip: COTTONDALE, FL 32431

Title: D () Delete
Name: GILBERT, RANDAL
Address: 1826 GAINER RD
City-St-Zip: CHIPLEY, FL 324286041

Title: DS () Delete
Name: JOHNSON, BONNIE
Address: 3039 EDIFICATION DR
City-St-Zip: COTTONDALE, FL 32431

Title: S () Delete
Name: HAYES, ELDORA
Address: PO BOX 467
City-St-Zip: ALFORD, FL 32420

Title: D () Delete
Name: PULLMAN, BELEENA
Address: 4861 TRAILOR PARK DR
City-St-Zip: MARIANNA, FL 32448

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:

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 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: JACKIE JOHNSON

Electronic Signature of Signing Officer or Director

D

11/25/2009

Date