

# **2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# 732521

**FILED**  
**Feb 08, 2011**  
**Secretary of State**

**Entity Name:** ASSOCIATED MINISTRIES, INC.

**Current Principal Place of Business:**

2914 JEFFERSON ST.  
MARIANNA, FL 32446 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 450  
MARIANNA, FL 32447 US

**New Mailing Address:**

**FEI Number:** 59-1680467

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLLIS,, JACK E  
4476 BROAD STREET  
MARIANNA, FL 32446 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:** JACK E. HOLLIS

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** HOLLIS, JACK E REV  
**Address:** 4476 BROAD ST  
**City-St-Zip:** MARIANNA, FL 32446 US

**Title:** VD  
**Name:** ARNOLD, ZACHARY L REV  
**Address:** 4466 PUTNAM STREET  
**City-St-Zip:** MARIANNA, FL 32446 US

**Title:** STD  
**Name:** HOLLIS, SHELLIE F  
**Address:** 4476 BROAD ST  
**City-St-Zip:** MARIANNA, FL 32446 US

**Title:** D  
**Name:** LANEY, RONALD D REV  
**Address:** 115 BEEKS CIRCLE  
**City-St-Zip:** WILLIAMSON, GA 30292 US

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:** REV. JACK E. HOLLIS

PD

02/08/2011

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

\_\_\_\_\_  
Date