2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 734211

FILED Oct 06, 2009 Secretary of State

Entity Name: CLASSIS OF FLORIDA, REFORMED CHURCH IN AMERICA, INC.

Current Principal Place of Business:

New Principal Place of Business:

C/O JILL M. SAS, TREASURER 126 SPANISH OAK LANE APOPKA, FL 32703

C/O JILL M. SAS, TREASURER 3631 BONNIE DŔIVE

APOPKA, FL 32703

Current Mailing Address:

New Mailing Address:

C/O JILL M. SAS, TREASURER 126 SPANISH OAK LANE APOPKA, FL 32703 US

C/O JILL M. SAS, TREASURER 3631 BONNIE DRIVE APOPKA, FL 32703 US

FEI Number: 59-1641177

APOPKA, FL 32703

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:

Name and Address of New Registered Agent:

126 SPANISH OAK LANE

SAS, JILL M 3631 BONNIE DRIVE US APOPKA, FL 32703

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.

SAS, JILL M

SIGNATURE: JILL M. SAS, TREASURER

10/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PRES () Delete MORENO, GERMAIN Name:

153 HENTORNE DRIVE Address: City-St-Zip: PALM SPRINGS, FL 33451

Title: TREA () Delete

Name: SAS, JILL M

Address: 126 SPANISH OAK LANE City-St-Zip: APOPKA, FL 32703

(X) Change () Addition

PORTER, KAREN DAY Name: Address: 10525 DECENT LANE City-St-Zip: HUDSON, FL 34667

Title: TREA (X) Change () Addition

Name: SAS, JILL M Address: 3631 BONNIE DRIVE City-St-Zip: APOPKA, FL 32703

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: JILL M SAS **TREA** 10/06/2009