

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 761986

FILED  
Oct 24, 2008  
Secretary of State

**Entity Name:** GULF BEACHES CHURCH BY THE SEA, INC.

**Current Principal Place of Business:**

495 137TH AVENUE CIRCLE  
MADEIRA BEACH, FL 337082539

**New Principal Place of Business:**

**Current Mailing Address:**

495 137TH AVENUE CIRCLE  
MADEIRA BEACH, FL 337082539

**New Mailing Address:**

**FEI Number:** 59-0737865      **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:**

HARSHBARGER, TIMOTHY  
9585 137TH WAY N.  
SEMINOLE, FL 33776      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: TIMOTHY HARSHBARGER

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD      ( ) Delete  
Name: HARSHBARGER, TIMOTHY  
Address: 9585 137TH WAY N.  
City-St-Zip: SEMINOLE, FL 33776

Title: VMD      ( ) Delete  
Name: SMITH, ROBERTA  
Address: 13301 1ST ST. E.  
City-St-Zip: MADEIRA BEACH, FL 33708

Title: MD      ( ) Delete  
Name: CHAPMAN, JEFFERY  
Address: 9955 54TH AVE. N.  
City-St-Zip: ST. PETERSBURG, FL 33708

Title: S      ( ) Delete  
Name: SCHARF, CAROL  
Address: 11160 4TH STREET EAST  
City-St-Zip: TREASURE ISLAND, FL 33706

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VMD      (X) Change ( ) Addition  
Name: HENRY, JAMES  
Address: 11285 - 66TH TERR. N.  
City-St-Zip: SEMINOLE, FL 33772

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

Title: S      (X) Change ( ) Addition  
Name: MALVAGNO, SUSAN  
Address: 10654 - 94TH PLACE N.  
City-St-Zip: SEMINOLE, FL 33772

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: TIMOTHY HARSHBARGER

TD

10/24/2008

Electronic Signature of Signing Officer or Director

Date