

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 23, 2009
Secretary of State

DOCUMENT# F08000003065

Entity Name: ADULLAM MINISTRIES, INC.

Current Principal Place of Business:

3504 LAKE LYNDA DRIVE STE 109
ORLANDO, FL 32817

New Principal Place of Business:

3504 LAKE LYNDA DRIVE
SUITE 109
ORLANDO, FL 32817

Current Mailing Address:

4760 SNAP CREEK LANE
DECATUR, GA 30035

New Mailing Address:

3504 LAKE LYNDA DRIVE
SUITE 109
ORLANDO, FL 32817

FEI Number: 20-5327655 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:

SPENCER, JAMES E SR
3488 FOXTON COURT
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

SPENCER, JAMES E JR
3488 FOXTON COURT
OVIEDO, FL 32765 US

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: JAMES E. SPENCER, JR.

11/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: MCKENZIE, JAMELLE E
Address: 4670 SNAP CREEK LANE
City-St-Zip: DECATUR, GA 30035

Title: VCVP () Delete
Name: MCKENZIE, GEOFFREY M
Address: 4670 SNAP CREEK LANE
City-St-Zip: DECATUR, GA 30035

Title: ST () Delete
Name: MORRIS, MARGIE
Address: 129 TYE STREET
City-St-Zip: STOCKBRIDGE, GA 30281

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: MCKENZIE, JAMELLE E
Address: 106 MIDDLETON DRIVE
City-St-Zip: PEACHTREE CITY, GA 30269

Title: VCVP (X) Change () Addition
Name: MCKENZIE, GEOFFREY M
Address: 106 MIDDLETON DRIVE
City-St-Zip: PEACHTREE CITY, GA 30269

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: JAMELLE E. MCKENZIE

CP

11/23/2009

Electronic Signature of Signing Officer or Director

Date