

# 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F99000000147

**FILED**  
**Mar 12, 2010**  
**Secretary of State**

**Entity Name:** FULL GOSPEL NATIVE MISSIONARY, INC.

**Current Principal Place of Business:**

350 SCOTT DRIVE  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 10766  
DAYTONA BEACH, FL 32120

**New Mailing Address:**

**FEI Number:** 43-6039978      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

BUCHANAN, ELEANOR T  
350 SCOTT DRIVE  
ORMOND BEACH, FL 32174      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: ELEANOR T. BUCHANAN

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

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: STD  
Name: BUCHANAN, MARK T  
Address: 350 SCOTT DR.  
City-St-Zip: ORMOND BEACH, FL 32174

Title: PD  
Name: BUCHANAN, ELEANOR  
Address: 350 SCOTT DRIVE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VD  
Name: SKINNER, HEATHER  
Address: 5101 S. CHEROKEE #644  
City-St-Zip: MUSKOGEE, OK 74403

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK T. BUCHANAN

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

STD

03/12/2010

\_\_\_\_\_  
Date