## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N00000000681

FILED Jaņ 1<u>3, 2</u>009 Secretary of State

Entity Name: EMMANUEL CHILDRENS' MINISTRY, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

100 AVIATION DR. S. 2755 68TH ST. S.W. NAPLES, FL 34105 #202

NAPLES, FL 34104

**Current Mailing Address: New Mailing Address:** 

100 AVIATION DR. S. 2755 68TH ST. S.W. #202 NAPLES, FL 34105 NAPLES, FL 34104

FEI Number: 59-3623962 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: Name and Address of New Registered Agent:

REYNOSO, WILLIAM A KREHLING, LINDA M 132 E. HILÓ STREET 2755 68TH ST. SW NAPLES, FL 34113 US NAPLES, FL 34105

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: LINDA M. KREHLING 01/13/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PSD () Delete (X) Change ( ) Addition REYNOSO, WILLIAM REYNOSO, WILLIAM A Name: Name:

100 AVIATION DR. S., SUITE 202 Address: 1012 ANGLER'S COVE SUITE D 308 Address:

City-St-Zip: NAPLES, FL 34104 City-St-Zip: MARCO ISLAND, FL 34145

Title: () Delete Title: (X) Change ( ) Addition Name: REYNOSO, ANGELA Name: KREHLING, LINDA M

Address: 100 AVIATION DR. S., SUITE 202 Address: 2755 68TH STREET, S.W City-St-Zip: NAPLES, FL 34104 City-St-Zip: NAPLES, FL 34105

Title: VTD (X) Delete Title: () Change () Addition

REYNOSO, DIAN Name: Name: 100 AVIATION DR. S., SUITE 202 Address: Address:

City-St-Zip: NAPLES, FL 34104 City-St-Zip:

Title: CD (X) Delete Title: () Change () Addition

Name: TUCKERMAN, TOD Name: 100 AVIATION DR. S., SUITE 202 Address: Address: City-St-Zip: NAPLES, FL 34104 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: LINDA M. KREHLING PR 01/13/2009