2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0000001394

FILED Dec 19, 2007 Secretary of State

Entity Name: RIVER OF FIRE MINISTRIES INTERNATIONAL, INC.

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

13717 NW 2ND AVE 818 SE 11TH ST

BATTLE GROUND, WA 98604 E65

VANCOUVER, WA 98686

VANCOUVER, WA 98686

New Mailing Address: Current Mailing Address:

13717 NW 2ND AVE 818 SE 11TH ST

BATTLE GROUND, WA 98604 E65

FEI Number: 59-3671295 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:

BEDSOLE, LASHAWN 581 PAINTED LEAF DR BROOKSVILLE, FL 34604 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: LASHAWN BEDSOLE

COMMERCE, GA 30529

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PSD (X) Change () Addition () Delete

STONECIPHER, JASON STONECIPHER, JASON Name: Name:

13717 NW 2ND AVE E65 Address: 818 SE 11TH ST. Address: City-St-Zip: VANCOUVER, WA 98685 City-St-Zip: BATTLE GROUND, WA 98604

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

STONECIPHER, CATHY Name: STONECIPHER, CATHY Name:

Address: 13717 NW 2ND AVE E65 Address: 818 SE 11TH ST.

City-St-Zip: VANCOUVER, WA 98685 City-St-Zip: BATTLE GROUND, WA 98604

Title: () Delete Title: () Change () Addition RICH, DEBBIE Name: Name:

16057 TAMPA PALMS BLVD W #131 Address: Address: TAMPA, FL 33647 US City-St-Zip:

City-St-Zip:

Title: () Delete Title: () Change () Addition Name: HOLLADAY, KEITH Name: Address: 2367 N. ELM ST. Address:

Title: Title: () Change () Addition

() Delete BOYD, JAMES Name: Name: 3911 STATE RD. 84 #203 Address: Address: City-St-Zip: **DAVIE, FL 33312** 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.

City-St-Zip:

SIGNATURE: JASON STONECIPHER **PSD** 12/19/2007