

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000003232

FILED
Oct 13, 2006
Secretary of State

Entity Name: HIS GREAT COMMISSION, INC.

Current Principal Place of Business:

1300 LAKE AVENUE
208
LAKE WORTH, FL 33460 US

New Principal Place of Business:

1301LAKE AVENUE
208
LAKE WORTH, FL 33460 US

Current Mailing Address:

1300 LAKE AVENUE
208
LAKE WORTH, FL 33460 US

New Mailing Address:

1301LAKE AVENUE
208
LAKE WORTH, FL 33460 US

FEI Number: 65-1013189 **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:

UCC FILING & SEARCH SERVICES, INC.
1574 VILLAGE SQUARE BLVD
SUITE 100
TALLAHASSEE, FL 32309 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: UMC OF THE PLAM BEACHES

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DO () Delete
Name: KRANTZ, BARBARA
Address: 18214 RIVER OAKS DRIVE
City-St-Zip: JUPITER, FL 33458

Title: DO () Delete
Name: HERRERA, LILLIANA
Address: 525 KIRK ROAD, APT 106A
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: DELGADO, MONICA
Address: 6266 TERRA ROSA CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: S () Delete
Name: CONSTANTINE, SUSAN
Address: 4597 VESPASIAN COURT
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: BARBARA A. KRANTZ

PRES

10/13/2006

Electronic Signature of Signing Officer or Director

Date