

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000003286

FILED
Feb 09, 2006
Secretary of State

Entity Name: JAMES BUSH III MINISTRIES, INC.

Current Principal Place of Business:

3015 NW 49TH STREET
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

3015 NW 49TH STREET
MIAMI, FL 33142

New Mailing Address:

FEI Number: 65-1022103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUSH, JAMES III
3015 NW 49TH STREET
MIAMI, FL 33142 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: JAMES BUSH, III

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BUSH, JAMES III
Address: 3015 NW 49TH STREET
City-St-Zip: MIAMI, FL 33142

Title: VPD () Delete
Name: BUSH, BERNADINE
Address: 3015 NW 49TH STREET
City-St-Zip: MIAMI, FL 33142

Title: D () Delete
Name: JONES, WILLIE J
Address: 2261 NW 58 ST.
City-St-Zip: MIAMI, FL 33142

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:

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: JAMES BUSH, III

PD

02/09/2006

Electronic Signature of Signing Officer or Director

Date