

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000005585

FILED
Jan 04, 2006
Secretary of State

Entity Name: SOZO MINISTRIES, INCORPORATED

Current Principal Place of Business:

8667 HEATHER RUN DR. S
JACKSONVILLE, FL 32256

New Principal Place of Business:

1405 TOWNSEND BLVD
JACKSONVILLE, FL 32211

Current Mailing Address:

8667 HEATHER RUN DR S
JACKSONVILLE, FL 32256

New Mailing Address:

PO BOX 8643
JACKSONVILLE, FL 32239

FEI Number: 59-3688408 **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:

MAILLET, ELYETTE C
8667 HEATHER RUN DR SO
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

MAILLET, ELYETTE C
1405 TOWNSEND BLVD
JACKSONVILLE, FL 32239 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: ELYETTE C MAILLET

01/04/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BOHANNAN, JACQUELINE S
Address: 141 BELLE FOREST CIR
City-St-Zip: NASHVILLE, TN 37221

Title: VP () Delete
Name: MAILLET, PATRICK P
Address: 8667 HEATHER RUN DR S
City-St-Zip: JACKSONVILLE, FL 32256

Title: P () Delete
Name: MAILLET, ELYETTE C
Address: 8667 HEATHER RUN DR S
City-St-Zip: JACKSONVILLE, FL 32256

Title: ST (X) Delete
Name: HODGES, BETTY
Address: 2011 EAST ROAD
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: BOHANNAN, JACQUELINE S
Address: 141 BELLE FOREST CIR
City-St-Zip: NASHVILLE, TN 37221

Title: VPT (X) Change () Addition
Name: MAILLET, PATRICK P
Address: 1405 TOWNSEND BLVD
City-St-Zip: JACKSONVILLE, FL 32239

Title: P (X) Change () Addition
Name: MAILLET, ELYETTE C
Address: 1405 TOWNSEND BLVD
City-St-Zip: JACKSONVILLE, FL 32211

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: ELYETTE C. MAILLET

P

01/04/2006

Electronic Signature of Signing Officer or Director

Date