2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000005612

FILED May 07, 2008 Secretary of State

Entity Name: THE CHURCH OF THE MESSIAH OF NORTH WEST FLORIDA, INC.

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

913 GULF BREEZE PKWY., 311 609 N ALCANIZ STREET GULF BREEZE, FL 32562 PENSACOLA, FL 32501

Current Mailing Address: New Mailing Address:

913 GULF BREEZE PKWY., 311 319 E JACKSON STREET GULF BREEZE, FL 32562 PENSACOLA, FL 32501

FEI Number: 59-3666345 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:

GOLIWAS, WILLIAM J
91 BAYBRIDGE DR
GULF BREEZE, FL 32561 US
GOLIWAS, WILLIAM J
319 E JACKSON STREET
PENSACOLA, FL 32501 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: WILLIAM J. GOLIWAS 05/07/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: BROWNING, RONALD Name: BROWNING, RONALD E

Address: 609 N. ALCANIZ STREET Address: 319 E JACKSON STREET
City-St-Zip: PENSACOLA, FL 32501 City-St-Zip: PENSACOLA, FL 32501

Title: VD () Delete Title: () Change () Addition Name: SMITHEE, STEPHEN Name:

 Name:
 SMITHEE, STEPHEN
 Name:

 Address:
 261 BEACON ST
 Address:

 City-St-Zip:
 PENSACOLA, FL 32503
 City-St-Zip:

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

 Name:
 HICKS, LAUREL
 Name:
 MILEY, GLEN A

 Address:
 2843 VIA ROMA
 Address:
 93 SHORELINE DRIVE

 City-St-Zip:
 GULF BREEZE, FL 32563
 City-St-Zip:
 GULF BREEZE, FL 32561

 Name:
 MILEY, GLEN
 Name:
 BROWNING, LISA M

 Address:
 101 BERRY AVE
 Address:
 319 E JACKSON STREET

 City-St-Zip:
 GULF BREEZE, FL 32561
 City-St-Zip:
 PENSACOLA, FL 32501

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: RONALD E. BROWNING PD 05/07/2008