

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000007798

FILED  
Mar 30, 2005  
Secretary of State

**Entity Name:** BUCKHANNON FAMILY MINISTRIES, INC.

**Current Principal Place of Business:**

4001 SANTA BARBARA BLVD.  
#274  
NAPLES, FL 34104

**New Principal Place of Business:**

364 AVENIDA LEONA  
SARASOTA, FL 34242

**Current Mailing Address:**

4001 SANTA BARBARA BLVD.  
#274  
NAPLES, FL 34104

**New Mailing Address:**

364 AVENIDA LEONA  
SARASOTA, FL 34242

**FEI Number:** 65-1068919      **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:**

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134      US

**Name and Address of New Registered Agent:**

HELLER, GREGORY  
364 AVENIDA LEONA  
SARASOTA, FL 34242      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: GREGORY HELLER

03/30/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: HELLER, GREGORY P  
Address: 4001 SANTA BARBARA BLVD. #274  
City-St-Zip: NAPLES, FL 34104

Title: VD      ( ) Delete  
Name: HELLER, TANYA J  
Address: 4001 SANTA BARBARA BLVD. #274  
City-St-Zip: NAPLES, FL 34104

Title: TDS      (X) Delete  
Name: CHRISMAN, LAURA  
Address: 4001 SANTA BARBARA BLVD. #274  
City-St-Zip: NAPLES, FL 34104

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PVD      (X) Change ( ) Addition  
Name: HELLER, GREGORY P  
Address: 364 AVENIDA LEONA  
City-St-Zip: SARAOSOTA, FL 34242

Title: TSD      (X) Change ( ) Addition  
Name: ADKINS, LAURA  
Address: 2510 ORSOVA WAY  
City-St-Zip: SARASOTA, FL 34231

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 Section 119.07(3)(i), 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: LAURA ADKINS

DIR

03/30/2005

Electronic Signature of Signing Officer or Director

Date