

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000003343

FILED  
Sep 30, 2009  
Secretary of State

**Entity Name:** REFUGE HOUSE MINISTRIES, INC.

**Current Principal Place of Business:**

2330 AURORA RD.  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

2330 AURORA RD.  
MELBOURNE, FL 32935

**New Mailing Address:**

**FEI Number:** 59-3720264

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRAHM, RICHARD H  
2330 AURORA RD  
MELBOURNE, FL 32935 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: RICHARD H. FRAHM

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FRAHM, RICHARD H  
Address: 2330 AURORA RD  
City-St-Zip: MELBOURNE, FL 32935

Title: TD ( ) Delete  
Name: FRAHM, CAROLINE O  
Address: 2330 AURORA RD  
City-St-Zip: MELBOURNE, FL 32935

Title: VD ( ) Delete  
Name: SAUER, LESTER  
Address: PO BOX 362342  
City-St-Zip: MELBOURNE, FL 329363243

Title: D ( ) Delete  
Name: CRYSTAL, STINNETT  
Address: PO BOX 362342  
City-St-Zip: MELBOURNE, FL 329362342

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: D (X) Change ( ) Addition  
Name: STINNETT, CRYSTAL  
Address: PO BOX 362342  
City-St-Zip: MELBOURNE, FL 329362342

Title: D ( ) Change (X) Addition  
Name: COLON, JACKIE  
Address: P.O. BOX 361195  
City-St-Zip: MELBOURNE, FL 32936

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: RICHARD H. FRAHM

PD

09/30/2009

Electronic Signature of Signing Officer or Director

Date