

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000005089

FILED
May 22, 2008
Secretary of State

Entity Name: ALLEN GRIFFIN MINISTRIES, INC.

Current Principal Place of Business:

1687 WEST GRANADA BLVD
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

PO BOX 731439
ORMOND BEACH, FL 32173

New Mailing Address:

1687 WEST GRANADA BLVD
ORMOND BEACH, FL 32174

FEI Number: 65-1122731 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:

LEEYEE, ADELBERT
12430 NE 2ND COURT
NORTH MIAMI, FL 33161 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: ADELBERT LEEYEE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GRIFFIN, ALLEN
Address: 149 PERFECT DRIVE
City-St-Zip: DAYTONA BEACH, FL 32124

Title: VD () Delete
Name: LEEYEE, ADELBERT
Address: 12430 NE 2ND COURT
City-St-Zip: NORTH MIAMI, FL 33161

Title: SD () Delete
Name: MITCHELL, LESTER
Address: 15863 NW 11TH ST
City-St-Zip: PEMBROKE PINES, FL 33028

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 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: ALLEN GRIFFIN

PD

05/22/2008

Electronic Signature of Signing Officer or Director

Date