2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000008688

FILED Apr 13, 2009 Secretary of State

Entity Name: STAR CHRISTIAN CENTER AND ACADEMY, INC.

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

1930 NE WALDO RD 6702 NW 28TH TERR GAINESVILLE, FL 32609 GAINESVILLE, FL 32653

Current Mailing Address: New Mailing Address:

1930 NE WALDO RD 6702 NW 28TH TERR GAINESVILLE, FL 32609 GAINESVILLE, FL 32653

FEI Number: 01-0599457 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

THOMAS-DYKES, PHYLLIS

1930 NE WALDO RD

GAINESVILLE, FL 32609 US

THOMAS-DYKES, PHYLLIS

6702 NW 28TH TERR

GAINESVILLE, FL 32653 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: PHYLLIS THOMAS-DYKES 04/13/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 THOMAS-DYKES, PHILLIS
 Name:
 THOMAS-DYKES, PHYLLIS

 Address:
 6702 NW 28 TERRACE
 Address:
 6702 NW 28 TERRACE

 City-St-Zip:
 GAINESVILLE, FL 32653
 City-St-Zip:
 GAINESVILLE, FL 32653

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

Name: THOMAS-SALTER, DEBBRA Name: THOMAS-DYKES, PHYLLIS

 Address:
 2234 NW 41 PL
 Address:
 6702 NW 28TH

 City-St-Zip:
 GAINESVILLE, FL 32605
 City-St-Zip:
 GAINESVILLE, FL 32653

Title: () Delete Title: SEC (X) Change () Addition THOMAS, SHEILA THOMAS-DYKES, PHYLLIS Name: Name: 6702 NW 28TH TERRACE Address: Address: 6702 NW 28TH TERRACE City-St-Zip: GAINESVILLE, FL 32653 City-St-Zip: GAINESVILLE, FL 32653

 Name:
 THOMAS, SR., PHILLIP PASTOR
 Name:
 THOMAS, -DYKES, PHYLLIS

 Address:
 2218 NE 67 DR
 Address:
 6702 NW 28 TERR

 Address:
 2218 NE 67 DR
 Address:
 6702 NW 28 TERR

 City-St-Zip:
 GAINESVILLE, FL 32609
 City-St-Zip:
 GAINESVILLE, FL 32653

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: PHYLLIS THOMAS-DYKES OFF 04/13/2009