

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000000359

FILED  
Feb 19, 2007  
Secretary of State

**Entity Name:** HEALING LIGHT SEMINARS, INC.

**Current Principal Place of Business:**

333 8TH AVE.  
INDIALANTIC, FL 32903

**New Principal Place of Business:**

279 N BABCOCK ST  
MELBOURNE, FL 32935

**Current Mailing Address:**

333 8TH AVE.  
INDIALANTIC, FL 32903

**New Mailing Address:**

279 N BABCOCK ST.  
MELBOURNE, FL 32935

**FEI Number:** 56-2297077      **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:**

KINBERG, EDWARD J  
2101 S. WAVERLY PL, STE. 200E  
MELBOURNE, FL 32901 US

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

KINBERG, EDWARD J  
1290 W. EAU GALLIE BLVD  
MELBOURNE, FL 32935 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: EDWARD J. KINBERG, ESQ.

02/19/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: RINDGE, DAVID  
Address: 333 8TH AVE.  
City-St-Zip: INDIALANTIC, FL 32903

Title: D ( ) Delete  
Name: RINDGE, SHELIA  
Address: 333 8TH AVE.  
City-St-Zip: INDIALANTIC, FL 32903

Title: D ( ) Delete  
Name: BARTON, DOROTHY D  
Address: 7730 INDIAN OAKS DR., APT. G 122  
City-St-Zip: VERO BEACH, FL 32960

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

Title: D (X) Change ( ) Addition  
Name: RINDGE, DAVID  
Address: 279 N BABCOCK ST  
City-St-Zip: MELBOURNE, FL 32935

Title: D (X) Change ( ) Addition  
Name: RINDGE, SHELIA  
Address: 279 N BABCOCK ST.  
City-St-Zip: MELBOURNE, FL 32935

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 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: SHEILA RINDGE

D

02/19/2007

Electronic Signature of Signing Officer or Director

Date