

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000004017

FILED
Dec 18, 2009
Secretary of State

Entity Name: T&T MINISTRY, INC.

Current Principal Place of Business:

6658 HATCHER RD
LAKELAND, FL 33811

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3568
LAKELAND, FL 33802

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)
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:

Name and Address of New Registered Agent:

HALL, THEADORE T JR
6658 HATCHER RD
LAKELAND, FL 33811 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: THEADORE T. HALL JR.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HALL, THEADORE T JR
Address: 6658 HATCHER RD
City-St-Zip: LAKELAND, FL 33811

Title: P () Delete
Name: SPEED, GOW A
Address: 1214 SPINNAKER DR
City-St-Zip: LAKELAND, FL 33805

Title: ELD () Delete
Name: MAYS, SANTOS
Address: 2351 HONEY DRIVE
City-St-Zip: LAKELAND, FL 33801

Title: VP () Delete
Name: HALL, SHERRY L
Address: 6658 HATCHER RD
City-St-Zip: LAKELAND, FL 33811

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: () 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: ANGELA D. FORTE

MRS.

12/18/2009

Electronic Signature of Signing Officer or Director

Date