

# 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N02000009753

**FILED**  
**Oct 02, 2006**  
**Secretary of State**

**Entity Name:** MARANATHA HERALD INT'L, INC.

**Current Principal Place of Business:**

P. O. BOX 4042  
OCALA, FL 34478 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 4042  
OCALA, FL 34478 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

MC DOWALL, JOEL E  
19 ALMOND TRL.  
OCALA, FL 34472 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: JOEL E. MC DOWALL

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MC DOWALL, JOEL E  
Address: P.O. BOX 4042  
City-St-Zip: OCALA, FL 34478 US

Title: D ( ) Delete  
Name: MC DOWALL, ROSE MARIE  
Address: P. O. BOX 4042  
City-St-Zip: OCALA, FL 34478 US

Title: D ( ) Delete  
Name: SWOAP, ZONA E  
Address: 5421 SE. 38TH. AVE.  
City-St-Zip: OCALA, FL 34480 US

**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 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: JOEL E. MC DOWALL

D

10/02/2006

Electronic Signature of Signing Officer or Director

Date