

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Mar 15, 2009
Secretary of State**

DOCUMENT# N03000001147

Entity Name: CHAMPIONS MINISTRY @ GAINESVILLE, INC.

Current Principal Place of Business:

312 NW 16TH AVE
GAINESVILLE, FL 32641

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5332
GAINESVILLE, FL 32601

New Mailing Address:

3203 SE 15TH STREET
GAINESVILLE, FL 32641

FEI Number: 05-0546601 FEI Number Applied For () FEI Number Not Applicable () 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:

SMITH, GRANT D
23006 NW 179TH PLACE
HIGH SPRINGS, FL 32643 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: GRANT SMITH

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SMITH, GRANT D
Address: 23006 NW 179TH PLACE
City-St-Zip: HIGH SPRINGS, FL 32643

Title: V (X) Delete
Name: SULLIVAN, LOUIS
Address: 4878 NW 21ST DRIVE
City-St-Zip: GAINESVILLE, FL 32605

Title: T () Delete
Name: MARTIN, CATINA S
Address: 4919 E UNV AVE
City-St-Zip: GAINESVILLE, FL 32641

Title: S () Delete
Name: JOHNSON, KAREN
Address: 730 SE 8TH ST
City-St-Zip: GAINESVILLE, FL 32601

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: CATINA MARTIN

Electronic Signature of Signing Officer or Director

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03/15/2009

Date