

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000002893

FILED
Oct 25, 2004
Secretary of State**Entity Name:** SPIRIT-FOCUS INTERNATIONAL MINISTRIES INC.**Current Principal Place of Business:**912 KOKOMO ROAD
LAKE HAMILTON, FL 33844**New Principal Place of Business:**912 ROBERTS ROAD
LAKE HAMILTON, FL 33851**Current Mailing Address:**PO BOX 2004
DAVENPORT, FL 33836**New Mailing Address:****FEI Number:** 51-0455740 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**ANGLIN, ERIC
1250 AVE. H
HAINES CITY, FL 33844 US**Name and Address of New Registered Agent:**ANGLIN, ERIC
108 CITRUS RIDGE COURT
HAINES CITY, FL 33844 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: TIFFANY L. HAMILTON

10/25/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ANGLIN, ERIC
Address: 1250 AVE. H
City-St-Zip: HAINES CITY, FL 33844

Title: VD () Delete
Name: ANGLIN, MARYE
Address: 995 BATES ROAD
City-St-Zip: HAINES CITY, FL 33844

Title: D () Delete
Name: HAMILTON, TIFFANY
Address: 303 S. 1ST STREET
City-St-Zip: HAINES CITY, FL 33844

Title: SD () Delete
Name: ANGLIN, JAMERA
Address: 1250 AVE. H
City-St-Zip: HAINES CITY, FL 33844

Title: TD (X) Delete
Name: WILLIAMS, NATASHA
Address: 303 S. 1ST STREET
City-St-Zip: HAINES CITY, FL 33844

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ANGLIN, ERIC
Address: 108 CITRUS RIDGE COURT
City-St-Zip: HAINES CITY, FL 33844

Title: VD (X) Change () Addition
Name: ANGLIN, JAMERA
Address: 108 CITRUS RIDGE COURT
City-St-Zip: HAINES CITY, FL 33844

Title: D (X) Change () Addition
Name: HAMILTON, TIFFANY L
Address: 303 S. 1ST STREET
City-St-Zip: HAINES CITY, FL 33844

Title: SD (X) Change () Addition
Name: WILLIAMS, NATASHA M
Address: 1250 AVE. H
City-St-Zip: HAINES CITY, FL 33844

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 Section 119.07(3)(i), 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: TIFFANY L. HAMILTON

D

10/25/2004

Electronic Signature of Signing Officer or Director

Date