2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000002893

FILED Jun 23, 2006 Secretary of State

Entity Name: SPIRIT-FOCUS INTERNATIONAL MINISTRIES INC.

Current Principal Place of Business: New Principal Place of Business:

912 ROBERTS ROAD LAKE HAMILTON, FL 33851

Current Mailing Address: New Mailing Address:

PO BOX 2004 2808 SHUMARD

DAVENPORT, FL 33836 WINTER HAVEN, FL 33880

FEI Number: 51-0455740 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: Name and Address of New Registered Agent:

ANGLIN, ERIC ANGLIN, ERIC 108 CITRUS RIDGE COURT 2808 SHUMARD ST

HAINES CITY, FL 33844 US WINTER HAVEN, FL 33880 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: ERIC ANGLIN 06/23/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 ANGLIN, ERIC
 Name:
 ANGLIN, ERIC

 Address:
 108 CITRUS RIDGE COURT
 Address:
 2808 SHUMARD STREET

 City-St-Zip:
 HAINES CITY, FL 33844
 City-St-Zip:
 WINTER HAVEN, FL 33880

Title: VD () Delete Title: VD (X) Change () Addition

 Name:
 ANGLIN, JAMERA
 Name:
 ANGLIN, JAMERA

 Address:
 108 CITRUS RIDGE COURT
 Address:
 2808 SHUMARD STREET

 City-St-Zip:
 HAINES CITY, FL 33844
 City-St-Zip:
 WINTER HAVEN, FL 33880

Title: D () Delete Title: () Change () Addition

 Name:
 HAMILTON, TIFFANY L
 Name:

 Address:
 303 S. 1ST STREET
 Address:

 City-St-Zip:
 HAINES CITY, FL 33844
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 WILLIAMS, NATASHA M
 Name:

 Address:
 1250 AVE. H
 Address:

 City-St-Zip:
 HAINES CITY, FL 33844
 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: JAMERA ANGLIN MRS 06/23/2006