

**2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N03000005370

**FILED**  
**Nov 08, 2004**  
**Secretary of State****Entity Name:** IN THE LINE OF FIRE MINISTRIES, INC.**Current Principal Place of Business:**1400 NW 110 AVE STE 413  
SUNRISE, FL 33322**New Principal Place of Business:****Current Mailing Address:**PO BOX 15787  
PLANTATION, FL 33318**New Mailing Address:****FEI Number:** 51-0472321      **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:**SPIEGEL & UTRERA, P.A.  
1840 SW 22 ST 4 FLR  
MIAMI, FL 33145      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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** DP      ( ) Delete  
**Name:** CARROLL, BONITA  
**Address:** 1400 NW 110 AVE STE 413  
**City-St-Zip:** SUNRISE, FL 33322**Title:** DS      ( ) Delete  
**Name:** CARROLL, CAROLYN  
**Address:** 1400 NW 110 AVE STE 413  
**City-St-Zip:** SUNRISE, FL 33322**Title:** DT      ( ) Delete  
**Name:** DAWES, CHERRELLE  
**Address:** 1400 NW 110 AVE STE 413  
**City-St-Zip:** SUNRISE, FL 33322**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 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: BONITA CARROLL

PD

11/08/2004

Electronic Signature of Signing Officer or Director

Date