

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000005772

FILED
Feb 16, 2009
Secretary of State

Entity Name: LIFE CHANGING MINISTRIES OF JACKSONVILLE, INC.

Current Principal Place of Business:

1440 DUNN AVE
SUITE 9
JACKSONVILLE, FL 32218

New Principal Place of Business:

7541 LEM TURNER RD
JACKSONVILLE, FL 32208

Current Mailing Address:

P. O. BOX 12908
JACKSONVILLE, FL 32209

New Mailing Address:

6903 LYSTER CIRCLE SOUTH
JACKSONVILLE, FL 32209

FEI Number: 02-0698441

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JONES, ERVIN III
6903 LYSTER CIRCLE S.
JACKSONVILLE, FL 32209 US

Name and Address of New Registered Agent:

JONES, ERVIN A III
6903 LYSTER CIRCLE S.
JACKSONVILLE, FL 32209 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: ERVIN A. JONES III

02/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: JONES, ERVIN III
Address: 6903 LYSTER CIRCLE S.
City-St-Zip: JACKSONVILLE, FL 32209

Title: VP () Delete
Name: JONES, MARY
Address: 6903 LYSTER CIRCLE S.
City-St-Zip: JACKSONVILLE, FL 32209

Title: ST () Delete
Name: STRATTON, VALARIE
Address: 7920 ORIOLE STREET #507
City-St-Zip: JACKSONVILLE, FL 32208

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 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: ERVIN A. JONES III

PRES

02/16/2009

Electronic Signature of Signing Officer or Director

Date