

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000005909

FILED
Oct 12, 2009
Secretary of State

Entity Name: CHILDREN BORN IN CHRIST MINISTRIES, INC.

Current Principal Place of Business:

1463 SPEARING ST
JACKSONVILLE, FL 32206

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3365
JACKSONVILLE, FL 32206 US

New Mailing Address:

FEI Number: 86-1074408 **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:

MCCRAY, JOHNNY M
1463 SPEARING ST
JACKSONVILLE, FL 32206 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: JOHNNY MCCRAY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WHITE, ALICE
Address: 533 WEST 17TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: D () Delete
Name: MCCRAY, CHARITY L
Address: 1463 SPEARING ST
City-St-Zip: JACKSONVILLE, FL 32206

Title: TREA () Delete
Name: WILLIAMS, EUGENE B
Address: 2051 WEST 45TH STREET
City-St-Zip: JACKSONVILLE, FL 32209

Title: VP () Delete
Name: COPELAND, PAULINE
Address: 2150 BEACON ST #209
City-St-Zip: JACKSONVILLE, FL 32207

Title: SEC () Delete
Name: ROSIER, THERESA
Address: 330 EAST 7TH STREET
City-St-Zip: JAX, FL 32206

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JACOBS, FREDDIE
Address: 11549 WONDERS PINE TRAIL WEST
City-St-Zip: JACKSONVILLE, FL 32258

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TREA (X) Change () Addition
Name: BOWMAN, KATRINA
Address: 104 KING STREET # 104
City-St-Zip: JACKSONVILLE, FL 32204

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: JOHNNY MCCRAY

Electronic Signature of Signing Officer or Director

DIR

10/12/2009

Date