2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 03, 2005
Secretary of State

DOCUMENT# N03000008378

Entity Name: GREATER LIFE OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

7445-8 103RD STREET
JACKSONVILLE, FL 32210

New Principal Place of Business:

Current Mailing Address:

7445-8 103RD STREET
JACKSONVILLE, FL 32210

New Mailing Address:

FEI Number: 54-1862651 **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:

WOOLARD, ERROL L PASTOR
7445-8 103RD STREET
JACKSONVILLE, FL 32210 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: ERROL L. WOOLARD
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CEOD ( ) Delete
Name: WOOLARD, ERROL L PASTOR
Address: 3158 WAVERING LANE
City-St-Zip: MIDDLEBURG, FL 32068

Title: VTD ( ) Delete
Name: BREWER, DONALD
Address: 11871 REMSON ROAD
City-St-Zip: JACKSONVILLE, FL 32223

Title: D ( ) Delete
Name: WOOLARD, DARNETTA M
Address: 3158 WAVERING LANE
City-St-Zip: MIDDLEBURG, FL 32068

Title: D ( ) Delete
Name: BROWN, DARNIE C
Address: 3158 WAVERING LANE
City-St-Zip: MIDDLEBURG, FL 32068

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:

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: ERROL L. WOOLARD PRES 10/03/2005
Electronic Signature of Signing Officer or Director — Date