

# 2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000008389

FILED  
Jan 14, 2010  
Secretary of State

**Entity Name:** THROUGH HIS EYES MISSION, INC.

**Current Principal Place of Business:**

SHASTA GRIMES  
2003 SE DELAWARE CT  
ARCADIA, FL 34266

**New Principal Place of Business:**

1052 BUSHIRE LANE  
PUNTA GORDA, FL 33983 US

**Current Mailing Address:**

SHASTA GRIMES  
2003 SE DELAWARE CT  
ARCADIA, FL 34266

**New Mailing Address:**

1052 BUSHIRE LANE  
PUNTA GORDA, FL 33983 US

**FEI Number:** 16-1695089      **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:**

GRIMES, SHASTA  
2003 SE DELAWARE CT  
ARCADIA, FL 34266 US

**Name and Address of New Registered Agent:**

MOTT, ASENSA  
22100 BREEZESWEPT AVENUE  
PUNTA GORDA, FL 33952 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: ASENSA MOTT

01/14/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MRS.  
Name: GRIMES, SHASTA  
Address: 1052 BUSHIRE LANE  
City-St-Zip: PUNTA GORDA, FL 33983 US

Title: MISS  
Name: REMINGTON, CHARITY  
Address: 338 BOEING STREET NW  
City-St-Zip: LAKE PLACID, FL 33852 US

Title: MRS.  
Name: TUCKER, BRANDI  
Address: 9604 SW HIGHWAY 72  
City-St-Zip: ARCADIA, FL 34266 US

Title: MISS  
Name: MARES, RENEE  
Address: 1039 NE POLK AVE  
City-St-Zip: ARCADIA, FL 34266 US

Title: MISS  
Name: REMINGTON, CHRISTA S  
Address: 338 BOEING STREET NW  
City-St-Zip: LAKE PLACID, FL 33852 US

Title: MR.  
Name: GRIMES, CHRISTOPHER  
Address: 1052 BUSHIRE LANE  
City-St-Zip: PUNTA GORDA, FL 33983 US

I hereby 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 all other like empowered.

SIGNATURE: SHASTA GRIMES

MRS.

01/14/2010

Electronic Signature of Signing Officer or Director

Date