## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N03000009306

FILED Oct 05, 2006 Secretary of State

Entity Name: DOONIE AND DEB CHEVY, GOD'S MIRACLE CHARIOT, INC.

**Current Principal Place of Business: New Principal Place of Business:** 330 WILLOW ST, PO BOX 221 MAYO, FL 32066 **Current Mailing Address: New Mailing Address:** 330 WILLOW ST, PO BOX 221 MAYO, FL 32066 FEI Number: 51-0485904 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HAMILTON, JAMES W JR. 330 WILLOW ST MAYO, FL 32066 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: JAMES W HAMILTON JR Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition HAMILTON, JAMES W JR. Name: Name: 330 WILLOW ST, PO BOX 221 Address: Address: City-St-Zip: MAYO, FL 32066 City-St-Zip: Title: VD ( ) Delete Title: () Change () Addition HAMILTON, DEBRA Name: Name: Address: 330 WILLOW ST. PO BOX 221 Address: City-St-Zip: MAYO, FL 32066 City-St-Zip: Title: () Delete Title: () Change () Addition MIDDLETON, LASHONA Name: Name: Address: PO BOX 161 Address: City-St-Zip: MAYO, FL 32066 City-St-Zip: Title: TD ( ) Delete Title: () Change () Addition MIDDLETON, PAMELA Name: Name: Address: PO BOX 15012 Address: City-St-Zip: GAINESVILLE, FL 32604 City-St-Zip: Title: VD () Delete Title: () Change () Addition DAVIS, MARIOLE Name: Name: Address: PO BOX 369 Address: City-St-Zip: FT WHITE, FL 32038 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES W HAMILTON JR PD 10/05/2006