2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000010905

Entity Name: ACT OF FAITH PRODUCTIONS, INC.

FILED Nov 06, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6929 WEST UNIVERSITY AVE 2521 SE 11TH AVE SUITE 11C GAINESVILLE, FL 32601 GAINESVILLE, FL 32607

New Mailing Address: Current Mailing Address:

P.O. BOX 1407

GAINESVILLE, FL 326041407

FEI Number: 20-0682836 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: Name and Address of New Registered Agent:

WELLS, ROBERT WELLS, ROBERT 6929 WEST UNIVERSITY AVE 2521 SÉ 11TH AVE GAINESVILLE, FL 32601 US SUITE 11C

GAINESVILLE, FL 32607 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: ROBERT WELLS 11/06/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BROWN-WHITE, LAURIA BROWN-WHITE, LAURIA Name: Name: 6929 WEST UNIVERSITY AVE STE 11C Address: 2521 SE 11TH AVE Address: City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: GAINESVILLE, FL 32601

Title: () Delete Title: (X) Change () Addition

WHITE, FRED JR. Name: Name: WHITE, FRED JR. Address: 6929 WEST UNIVERSITY AVE STE 11C Address: 2521 SE 11TH AVE City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: GAINESVILLE, FL 32601

Title: () Delete Title: (X) Change () Addition

ALEXANDER, DELIA ALEXANDER, DELIA Name: Name: 6929 WEST UNIVERSITY AVE STE 11C Address: Address: 2521 SE 11TH AVE City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: GAINESVILLE, FL 32601

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.

Ρ SIGNATURE: LAURIA BROWN-WHITE 11/06/2005