2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000010905

Entity Name: ACT OF FAITH PRODUCTIONS, INC.

FILED Nov 17, 2006 Secretary of State

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

2521 SE 11TH AVE 2048 NE 16TH TERR GAINESVILLE, FL 32601 GAINESVILLE, FL 32609

Current Mailing Address: New Mailing Address:

P.O. BOX 1407 P.O. BOX 2574

GAINESVILLE, FL 326041407 GAINESVILLE, FL 32602

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 2521 SÉ 11TH AVE

GAINESVILLE, FL 32601 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

OFFICERS AND DIRECTORS:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

BROWN-WHITE, LAURIA WHITE, LAURIA Name: Name: 2521 SE 11TH AVE Address: 2048 NE 16TH TERR Address: City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32609

Title: () Delete Title: (X) Change () Addition WHITE, FRED JR. Name: Name: WHITE, FRED JR.

Address: 2521 SE 11TH AVE Address: 2048 NE 16TH TERR City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32601

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

ALEXANDER, DELIA Name: Name: Address: 2521 SE 11TH AVE Address: City-St-Zip: GAINESVILLE, FL 32601 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: LAURIA WHITE **PRES** 11/17/2006

Electronic Signature of Signing Officer or Director

Date