

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000000796

FILED  
Nov 05, 2008  
Secretary of State

**Entity Name:** MARANATHA INTERNATIONAL CHRISTIAN COLLEGE AND SEMINARY INC.

**Current Principal Place of Business:**

3019 NORTH PINE HILLS RD  
ORLANDO, FL 32808 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4476  
WINTER PARK, FL 32792 US

**New Mailing Address:**

3862 BENTFORD CT  
ORLANDO, FL 32817

**FEI Number:** 20-0644708 **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:**

ALBINO, ANGELO  
7631 SILVER CROWN CT.  
ORLANDO, FL 32818 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: ANGELO ALBINO

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: ROSA, NOEMI  
Address: 3862 BENTFORD CT.  
City-St-Zip: ORLANDO, FL 32817 US

Title: VP ( ) Delete  
Name: RIVERA, PEDRO  
Address: 127 TAMPICO LN.  
City-St-Zip: KISSIMMEE, FL 34743 US

Title: S ( ) Delete  
Name: ALBINO, JACKELINE  
Address: 7631 SILVER CROWN CT.  
City-St-Zip: ORLANDO, FL 32818 US

Title: T ( ) Delete  
Name: TORO, TOMAS Y  
Address: 3862 BENTFORD CT.  
City-St-Zip: ORLANDO, FL 32817 US

Title: O ( ) Delete  
Name: LUCHESSI, LUIS  
Address: BO. EMAJAGUAS  
City-St-Zip: MAUNABO, PR 00707 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: ALBINO, ANGELO  
Address: 7631 SILVER CROWN CT  
City-St-Zip: ORLANDO, FL 32818 US

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 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: NOEMI ROSA

PRES

11/05/2008

Electronic Signature of Signing Officer or Director

Date