## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N04000004159

Entity Name: RIVERS OF LATTER RAIN, INC.

FILED Jul 05, 2006 Secretary of State

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

12738 CHARLIE B. WAY 617 N. KLEVIN SUITE #4 THONOTOSASSA, FL 33592 ANCHORAGE, AK 99508

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 111693 P.O. BOX 16894

TAMPA, FL 33687 ANCHORAGE, AK 99511

FEI Number: 13-4224521 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:

PATTERSON, BRINDA PATTERSON, BRINDA 12738 CHARLIE B. WAY P.O. BOX 111693

THONOTOSASSA, FL 33592 US ANCHORAGE, AK, FL 99511 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: BRINDA PATTERSON 07/05/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

PATTERSON, BRINDA PATTERSON, BRINDA Name: Name: Address: P.O. BOX 16894 Address: P.O. BOX 111693 City-St-Zip: TAMPA, FL 33687 City-St-Zip: ANCHORAGE, AK 99511 US

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

CHRISTOPHER, MARILYN Name: Name: LANTZ, DAVID Address: 4101 BENMAR ST Address: P.O. BOX 111693 City-St-Zip: FT WORTH, TX 76103 City-St-Zip: ANCHORAGE, AK 99511 US

Title: () Delete Title: (X) Change ( ) Addition MILSTEAD, MARILYN REAPP, MARILYN Name: Name:

601 NEIGHBORHOOD RD 20840 TWP 293 Address: Address: City-St-Zip: GALLIPOLIA, OH 45631 City-St-Zip: DEXTER CITY, OH 45727

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: BRINDA PATTERSON ED 07/05/2006