2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 20, 2007
Secretary of State

DOCUMENT# N04000006313

Entity Name: W.O.M.B.S. MINISTRIES, INC.

Current Principal Place of Business:

1953 RUGBY RD.
JACKSONVILLE, FL 32208 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8414
JACKSONVILLE, FL 32239 US

New Mailing Address:

P.O. BOX 77113
JACKSONVILLE, FL 32226 US

FEI Number: 03-0476245 **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:

GAYLE, TONICHIA C
4057 BESSENT RD.
JACKSONVILLE, FL 32218 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: TONICHIA C. GAYLE
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete
Name: GAYLE, TONICHIA C
Address: 4057 BESSENT RD.
City-St-Zip: JACKSONVILLE, FL 32218

Title: CFO ( ) Delete
Name: SMITH, CHENITA
Address: 2745 EGRET WALK TERRACE
City-St-Zip: JACKSONVILLE, FL 32226

Title: COO ( ) Delete
Name: JOHNSON, FATIMA
Address: 1953 RUGBY RD.
City-St-Zip: JACKSONVILLE, FL 32208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: TONICHIA C. GAYLE CEO 09/20/2007
Electronic Signature of Signing Officer or Director Date