

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000006383

FILED
Sep 29, 2006
Secretary of State

Entity Name: REMNANT YOUTH MINISTRIES, INC.

Current Principal Place of Business:

13018 GUNN HIGHWAY
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

PO BOX 341888
TAMPA, FL 33694

New Mailing Address:

FEI Number: 20-1368648 **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:

LAZZARA, PHILIP R ESQ
307 S BLVD SUITE D
TAMPA, FL 33606 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: PHILIP R LAZZARA

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOUSEFIELD, DAVID B
Address: 2801 WHITTINGTON PLACE
City-St-Zip: TAMPA, FL 33618

Title: T () Delete
Name: HOUSEFIELD, DARLENE
Address: 2801 WHITTINGTON PLACE
City-St-Zip: TAMPA, FL 33618

Title: V () Delete
Name: YOUNG, STEVEN R
Address: 11719 PALMER DR
City-St-Zip: TAMPA, FL 33624

Title: V () Delete
Name: ORTIZ, ERNEST
Address: 6010 HAMMOCK WOODS DRIVE
City-St-Zip: ODESSA, FL 33556

Title: S () Delete
Name: ORTIZ, MAJA J
Address: 6010 HAMMOCK WOODS DRIVE
City-St-Zip: ODESSA, FL 33556

Title: V () Delete
Name: BARTLETT, VERNA O
Address: PO BOX 342681
City-St-Zip: TAMPA, FL 33694

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:

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 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: VERNA O BARTLETT

V

09/29/2006

Electronic Signature of Signing Officer or Director

Date