

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000007725

FILED  
Sep 22, 2005  
Secretary of State

Entity Name: MC HENDRY MINISTRIES INC.

## Current Principal Place of Business:

1102 BLUE HERON LANE WEST  
JACKSONVILLE, FL 32250

## New Principal Place of Business:

## Current Mailing Address:

1102 BLUE HERON LANE WEST  
JACKSONVILLE, FL 32250

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X)  
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:

MC HENDRY, PETER  
1102 BLUE HERON LANE WEST  
JACKSONVILLE, FL 32250 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: PETER MC HENDRY

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: MC HENDRY, PETER  
Address: 1102 BLUE HERON LANE WEST  
City-St-Zip: JACKSONVILLE, FL 32250

Title: VP ( ) Delete  
Name: MC HENDRY, ANNE  
Address: 1102 BLUE HERON LANE WEST  
City-St-Zip: JACKSONVILLE, FL 32250

Title: SEC ( ) Delete  
Name: MC HENDRY, PETER  
Address: 1102 BLUE HERON LANE WEST  
City-St-Zip: JACKSONVILLE, FL 32250

Title: DIR ( ) Delete  
Name: MC HENDRY, PETER  
Address: 1102 BLUE HERON LANE WEST  
City-St-Zip: JACKSONVILLE, FL 32250

Title: DIR ( ) Delete  
Name: MC HENDRY, ANNE  
Address: 1102 BLUE HERON LANE WEST  
City-St-Zip: JACKSONVILLE, FL 32250

Title: DIR ( ) Delete  
Name: MC HENDRY, WARREN  
Address: 1102 BLUE HERON LANE WEST  
City-St-Zip: JACKSONVILLE, FL 32250

## 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 Section 119.07(3)(i), 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: PETER MC HENDRY

P

09/22/2005

Electronic Signature of Signing Officer or Director

Date