

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000010684

FILED
Jun 21, 2006
Secretary of State

Entity Name: CHRIST THE LIVING CORNERSTONE, INC.

Current Principal Place of Business:

1365 RUNNINGBROOK CT.
JACKSONVILLE, FL 32225

New Principal Place of Business:

2105 PHOENIX AVE.
JACKSONVILLE, FL 32206

Current Mailing Address:

1365 RUNNINGBROOK CT.
JACKSONVILLE, FL 32225

New Mailing Address:

2105 PHOENIX AVE.
JACKSONVILLE, FL 32206

FEI Number: 36-4554481 **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:

KEY II, LEON P
1365 RUNNINGBROOK CT
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

KEY, LEON P II
2105 PHOENIX AVE.
JACKSONVILLE, FL 32206 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: LEON P. KEY II

06/21/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: KEY II, LEON P
Address: P.O. BOX 15215
City-St-Zip: JACKSONVILLE, FL 32239

Title: D () Delete
Name: MEIDE, PHILLIP G
Address: 12900 HUNTLEY AMNER DR.
City-St-Zip: JACKSONVILLE, FL 32222

Title: D () Delete
Name: KEY, TANISHA A
Address: 11800 UNF DR. UNIT #2156
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: KEY, LEON P II
Address: P.O. BOX 15215
City-St-Zip: JACKSONVILLE, FL 32239

Title: D (X) Change () Addition
Name: ARNOLD, FALSARIO
Address: 2281 MASERATI CT
City-St-Zip: JACKSONVILLE, FL 32246

Title: D (X) Change () Addition
Name: KEY, ANDREA D
Address: P. O BOX 15215
City-St-Zip: JACKSONVILLE, FL 32239

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: LEON P. KEY II

D

06/21/2006

Electronic Signature of Signing Officer or Director

Date