## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N04000011192  1. Entity Name THRU THE ROOF MINISTRIES, INC.				SECRETARY DIVISION OF CO	OF 51014
Principal Place of Business 208 17TH STREET ST AUGUSTINE, FL 32084  Mailing Address 7831 FAWN VALLEY LANE JACKSONVILLE, FL 32256			La - ∠	ATEMI D 2/12	5N1 <u>05-09</u>
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 308 3rd Street 308 3rd Suite, Apt. #, etc. Suite, Apt. #, etc.		Street		<u> </u>	
			030920		CR2E099 (1/07)
St. Augustine, FL St. Augustin			4. FEI No. 59-3	umber 3790336	Applied For Not Applicable
32084 St. Johns		St. John	2		\$8.75 Additional Fee Required
6. Name and Address of Current R	egistered Agent	Name	7. Name	and Address of New Regi	stered Agent
LAWRENCE, HAROLD L 208 17TH STREET	Street Add	Street Address (P.O. Box Number is Not Acceptable)			
ST AUGUSTINE, FL 32084	30	308 3rd Street			
City St. A				stine	FL 33084
8. 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. I am familiar with, and accept the obligations of registered agent.					
SOO145571565 SIGNATURE					
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent eignature required when reinstating)  Make check payable to					
FILE NOWIII FEE IS \$297.50				ſ	Department of State
				l l	
10. OFFICERS AND DIRE	· · · · · · · · · · · · · · · · · · ·	11.	ADDITIONS	/CHANGES TO OFFICERS	AND DIRECTORS IN 10
TITLE P/D NAME LAWRENCE, HAROLD	CTORS Delete	TITLE NAME			·
TITLE P/D	· · · · · · · · · · · · · · · · · · ·	TITLE	308 3	rd Street	AND DIRECTORS IN 10 Change Addition  FL 32084
TITLE P/D NAME LAWRENCE, HAROLD STREET ADDRESS CITY-ST-ZIP ST AUGUSTINE, FL 32084 TITLE T/D	· · · · · · · · · · · · · · · · · · ·	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	308 3 St. Au	rd Street 1 Sustine,	AND DIRECTORS IN 10  Change Addition  FL 32084  Change Addition
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TITLE P/D NAME LAWRENCE, HAROLD STREET ADDRESS CITY-ST-ZIP ST AUGUSTINE, FL 32084  TITLE T/D NAME HYSLER, JODY STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32256  TITLE C/D NAME CHINCHAR, MICHAEL STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32259  CITY-ST-ZIP JACKSONVILLE, FL 32259	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	308 3 St. Au T/D Mel F 625 D Ponte C/D	rd Street (Sustine, annin Ponte Vedra Vedra Bch	AND DIRECTORS IN 10  Change Addition  FL 32084  Change Addition  2/31 vd.  FL 32082  Change Addition  Addition  CY Way  32256
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