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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FRESH START TEMPLE INC
(Name of Corporation)

DOCUMENT NUMBER: NO. 4551 FEL NO-07-9872437

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PASTOR ELLENE C. SMITH
(Name of Contact Person)

FRESH START TEMPLE INC
(Firm/Company)

853 FERNWAY Street
(Address)

JACKSONVILLE, Florida, 32208
(City/State and Zip Code)

For further information concerning this matter, please call:

Pastor Ellene C. Smith at (904) 768-2963
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



Fresh Start Temple, Inc.

*409 Cherokee Street
Jacksonville, Florida 32254*

*Dr. Ellene C. Smith, Pastor
Prophen John A. Williams, Co-Pastor*

Certificate of status Desired

*in close check \$8.75
When recorded.*

THANK you,

Pastor Ellene C. Smith

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FRESH START TEMPLE Incorporated

2. The principal office address: 409 CHEROKEE STREET
JACKSONVILLE, FL. 32254

3. The mailing address (if different): P.O. Box 3484
JACKSONVILLE, FL - 32206

4. Date of incorporation/qualification: Feb 6, 2006 Document number: NOFF 4551

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: FEE NO-079872437

JOHN F. MACLENNAN
1920 SAN MARCO BLVD.
JACKSONVILLE, FLORIDA 32207

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CO-PASTOR JOHN A. WILLIAMS
10856 KEY HAVEN BLVD.
(P.O. Box NOT acceptable)
JACKSONVILLE, FLORIDA 32218

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The street address of its registered office and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Pastor Ellene C. Smith
(Signature of an officer or director)

PASTOR ELLENE C. SMITH
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

John A. Williams
(Signature of Registered Agent)

7/25/06
(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314