2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000000464

FILED Nov 17, 2006 Secretary of State

Entity Name: THREE ANGELS EDUCATION FOUNDATIOIN, INC. **Current Principal Place of Business: New Principal Place of Business:** 2487 CENTERGATE DR. APT. #101 5007 HEMINGFORD COURT MIRAMAR, FL 33025 PALMETTO, FL 34221 **Current Mailing Address: New Mailing Address:** 2487 CENTERGATE DR. APT. #101 5007 HEMINGFORD COURT MIRAMAR, FL 33025 PALMETTO, FL 34221 FEI Number: 86-1077700 FEI Number Applied For () FEI Number Not Applicable () 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: WHITE, MALCOLM WHITE, MALCOLM 5007 HÉMINGFORD COURT 2487 CENTERGATE DR. APT. #101 MIRAMAR, FL 33025 PALMETTO, FL 34221 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: MALCOLM WHITE 11/17/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change (X) Addition WHITE, MALCOLM Name: Name: Address: Address: 5007 HEMINGFORD COURT City-St-Zip: City-St-Zip: PALMETTO, FL 34221 US () Change (X) Addition Title: Title: SEC () Delete FORD, HERMAN Name: Name: Address: Address: 1960 LAKEWOOD DRIVE SOUTH #2E City-St-Zip: City-St-Zip: ST. PETERSBURG, FL 33712 US Title: () Delete Title: **TRES** () Change (X) Addition Name: WHITE, FLORENCE R Name: 5007 HEMINGFORD COURT Address: Address: City-St-Zip: City-St-Zip: PALMETTO, FL 34221 US Title: () Delete Title: () Change (X) Addition Name: Name: MACK, MONICA Address: Address: 801 6TH AVE SOUTH City-St-Zip: City-St-Zip: ST. PETERSBURG, FL 33701 US

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: MALCOLM WHITE PRES 11/17/2006