

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000001351

FILED
Feb 08, 2007
Secretary of State

Entity Name: BACK TO BASICS 2 OUTREACH MINISTRIES INC.

Current Principal Place of Business:

431 HUBBARD STREET
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

431 HUBBARD STREET
DELAND, FL 32720

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **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:

JOHNSON, HOLIDAY
431 HUBBARD STREET
DELAND, FL 32720 US

Name and Address of New Registered Agent:

BROWN, ANTHONY M
431 HUBBARD STREET
DELAND, FL 32720 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: ANTHONY M. BROWN

02/08/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JOHNSON, HOLIDAY
Address: 320 W. HOWRY AVE. #4
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: BANKS, DONNA M
Address: 910 S. ADELLE AVE
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: ANDERSON, GRANDVILLE
Address: 935 S. ADELLE AVE
City-St-Zip: DELAND, FL 32720

Title: D () Delete
Name: BROWN, ANTHONY M
Address: 107 EARL PL
City-St-Zip: BUFFALO, NY 14211

Title: D () Delete
Name: GILES, JAMES
Address: 274 SUMNER PL
City-St-Zip: BUFFALO, NY 14212

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ANTHONY, BROWN M
Address: 2832 JEWEL AVENUE
City-St-Zip: DELTONA, FL 32738

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BROWN, KATHERINE L
Address: 2832 JEWEL AVENUE
City-St-Zip: DELTONA, FL 32738

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 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: ANTHONY M. BROWN

CEO

02/08/2007

Electronic Signature of Signing Officer or Director

Date