

2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Jun 27, 2012
Secretary of State**

DOCUMENT# N05000002524

Entity Name: JESUS CARES LEARNING ACADEMY, INC.

Current Principal Place of Business:

129 S 5TH ST
HAINES CITY, FL 33844

New Principal Place of Business:

Current Mailing Address:

129 S 5TH ST
HAINES CITY, FL 33844

New Mailing Address:

FEI Number: 20-2600728 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BAKER THOMAS, KATHLEEN
155 PINE STREET
HAINES CITY, FL 33838 US

Name and Address of New Registered Agent:

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: KATHLEEN BAKER THOMAS

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CP
Name: BAKER THOMAS, KATHLEEN
Address: 155 PINE ST.
City-St-Zip: HAINES CITY, FL 33838

Title: S
Name: DANIELS WEST, BETTYE
Address: 1412 WOOD AVE.
City-St-Zip: HAINES CITY, FL 33838

Title: D
Name: MATTHEWS, ANNIE LAURA
Address: 1505 N. NEW YORK AVE.
City-St-Zip: LAKELAND, FL 33805

Title: D
Name: JOHNSON, ROSALIND H.
Address: 2401 2ND ST. NW, APT. 77
City-St-Zip: WINTER HAVEN, FL 33881

Title: D
Name: FIELDER, DARRIN KEITH
Address: 38 TANGELO DR.
City-St-Zip: HAINES CITY, FL 33844

I hereby 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 all other like empowered.

SIGNATURE: KATHLEEN BAKER THOMAS

CP

06/27/2012

Electronic Signature of Signing Officer or Director

Date