2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000002679

Entity Name: JIMMIE L. WILLIAMS MINISTRIES, INC

FILED Dec 13, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

146 AVE C 550 SW 10TH AVE

PORT ST JOE, FL 32456 HOMESTEAD, FL 33030

Current Mailing Address: New Mailing Address:

146 AVE C 550 SW 10TH AVE

PORT ST JOE, FL 32456 HOMESTEAD, FL 33030

FEI Number: 75-3184102 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:

WILLIAMS, JIMMIE L WILLIAMS, JIMMIE L REV. 146 AVE C 550 SW 10TH AVE

PORT ST JOE, FL 32456 US HOMESTEAD, FL 33030 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: JIMMIE L. WILLIAMS, III 12/13/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 WILLIAMS, JIMMIE L

 Address:
 146 AVE C

 Address:
 550 SW 10TH AVE

Address: 146 AVE C
City-St-Zip: PORT ST JOE, FL 32456
City-St-Zip: HOMESTEAD, FL 33030

Title: V () Delete Title: V (X) Change () Addition

 Name:
 BRYANT, SHERANDA
 Name:
 WILLIAMS, SHERANDA L

 Address:
 85 FEILDVIEW LN
 Address:
 85 FEILDVIEW LN

 City-St-Zip:
 EOVINGTON, GA 30016
 City-St-Zip:
 COVINGTON, GA 30016

Title: D () Delete Title: () Change () Addition

 Name:
 SOUVIENA, EVÂNGELA
 Name:

 Address:
 1007 VIRIUNGA AVE
 Address:

 City-St-Zip:
 CLEWISTON, FL 33440
 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: JIMMIE WILLIAMS P 12/13/2006