

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000004192

**FILED**  
**Mar 16, 2009**  
**Secretary of State**

**Entity Name:** PASTORAL MINISTRIES OF CENTRAL FLORIDA INC.

**Current Principal Place of Business:**

690 W. ROSEWOOD LANE  
TAVARES, FL 32778

**New Principal Place of Business:**

1566 DRAYTON AVE.  
DELTONA, FL 32725

**Current Mailing Address:**

P.O. BOX 966  
TAVARES, FL 32778

**New Mailing Address:**

P.O. BOX 740125  
ORANGE CITY, FL 32774

**FEI Number:** 20-2820467      **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:**

BRADDOCK, BRIAN B REV.  
690 W. ROSEWOOD LANE  
TAVARES, FL 32778    US

**Name and Address of New Registered Agent:**

BRADDOCK, BRIAN B REV.  
1566 DRAYTON AVE.  
DELTONA, FL 32725    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: BRIAN B BRADDOCK

03/16/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title:            D            ( ) Delete  
Name:            BRADDOCK, BRIAN B REV.  
Address:        P.O. BOX 966  
City-St-Zip:    TAVARES, FL 32778

Title:            D            ( ) Delete  
Name:            BRADDOCK, ROSEANN  
Address:        P.O. BOX 966  
City-St-Zip:    TAVARES, FL 32778

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            D            (X) Change ( ) Addition  
Name:            BRADDOCK, BRIAN B REV.  
Address:        PO BOX 740125  
City-St-Zip:    ORANGE CITY, FL 32774

Title:            D            (X) Change ( ) Addition  
Name:            SMITH, MICHAEL S  
Address:        P.O. BOX 740125  
City-St-Zip:    ORANGE CITY, FL 32774

I hereby certify that the information supplied with this filing does not qualify 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: BRIAN BRADDOCK

D

03/16/2009

Electronic Signature of Signing Officer or Director

Date