

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000004669

FILED
May 05, 2009
Secretary of State

Entity Name: HURTING HEARTS OUTREACH MINISTRIES, INC.

Current Principal Place of Business:

2222 WEST BOBE STREET
PENSACOLA, FL 32501

New Principal Place of Business:

Current Mailing Address:

2222 WEST BOBE STREET
PENSACOLA, FL 32501

New Mailing Address:

2908 N TARRAGONA ST
PENSACOLA, FL 32503

FEI Number: 82-0151297 **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:

HANNAH, MARGARET
1318 WING FOOT WAY
PENSACOLA, FL 32503 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: MARGARET HANNAH

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MINNS, BERNICE
Address: 8630 STOCKDALE AVE
City-St-Zip: PENSACOLA, FL 32514

Title: TT () Delete
Name: HANNAH, MARGARET
Address: 1318 WINGFOOT WAY
City-St-Zip: PENSACOLA, FL 32505

Title: V () Delete
Name: HANNAH, MARGARET
Address: 1318 WINGFOOT WAY
City-St-Zip: PENSACOLA, FL 32505

Title: S () Delete
Name: DIAL, VICTORIA
Address: 8630 STOCKDALE AVE
City-St-Zip: PENSACOLA, FL 32514

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MARGARET HANNAH

Electronic Signature of Signing Officer or Director

MRS

05/05/2009

Date