2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000007502

Entity Name: GREATER LOVE MINISTRIES, INC

FILED Feb 02, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
400 RUFFLES ST. EATONVILLE, FL 32751		1123 WEST FAIRBANKS AVENUE ORLANDO, FL 32804-204	
Current Mailing Address:		New Mailing Address:	
6119 AMBASSADOR DR. ORLANDO, FL 328085403 US		6119 AMBASSADOR DR. ORLANDO, FL 32808 US	
	e with s. 607.193(2)(b), F.S., the corporation did not receive	' - '	e. `´´
Name and	Address of Current Registered Agent:	Name and	Address of New Registered Agent:
	S, DENNIS L ASSADOR DR. , FL 32808 US		
The above in the State	named entity submits this statement for the purpose of Florida.	of changing it	s registered office or registered agent, or both,
SIGNATUR	E: DENNIS L TOMPKINS		
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DC () Delete TOMPKINS, DENNIS L 6119 AMBASSADOR DR. ORLANDO, FL 328085403 US	Title: Name: Address: City-St-Zip:	PD (X) Change () Addition TOMPKINS, DENNIS L 6119 AMBASSADOR DR. ORLANDO, FL 32808 US
Title: Name: Address: City-St-Zip:	DP () Delete TOMPKINS, NATASHA 6119 AMBASSADOR DR. ORLANDO, FL 328085403 US	Title: Name: Address: City-St-Zip:	D (X) Change () Addition TOMPKINS, NATASHA 6119 AMBASSADOR DR. ORLANDO, FL 32808 US
Title: Name: Address: City-St-Zip:	DVP () Delete TOMPKINS, JURLIAN 400 RUFFLES STREET EATONVILLE, FL 32751 US	Title: Name: Address: City-St-Zip:	D (X) Change () Addition TOMPKINS, JURLEAN 400 RUFFLES STREET EATONVILLE, FL 32751 US
Title: Name: Address: City-St-Zip:	D () Delete TOMPKINS, EMMETT SR 400 RUFFLES STREET EATONVILLE, FL 32751 US	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition ROSS, ANTHONY 319 WILLOW RIDGE STREET SANFORD, FL 32771
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	S () Change (X) Addition GAINER, SYLVIA 1921 NICOLE LEE CIRCLE APT 1115 APOPKA, FL 32703

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: DENNIS L TOMPKINS PD 02/02/2009