2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000010607

Entity Name: INTEGRITY INTERNATIONAL CHURCH, INC

FILED Nov 15, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6606 S. FLORIDA AVE 5337 N. SOCRUM LOOP LAKELAND, FL 33813

#227

LAKELAND, FL 33809

Current Mailing Address: New Mailing Address:

4798 S. FLORIDA AVE 5337 N. SOCRUM LOOP **UNIT 405** #227

LAKELAND, FL 33813 LAKELAND, FL 33805

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

JENKINS, GREG BELL, GINA

4798 S. FLORIDA AVE 5337 N. SOCRUM LOOP

UNIT 405 LAKELAND, FL 33813 US LAKELAND, FL 33805 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: GINA BELL 11/15/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

D/P () Delete (X) Change () Addition

JENKINS, GREG BELL, DAVID Name: Name: 6606 S. FLORIDA AVE Address: 5337 N. SOCRUM LOOP #227 Address:

LAKELAND, FL 33813 City-St-Zip: City-St-Zip: LAKELAND, FL 33809

Title: () Delete Title: (X) Change () Addition KING, CYNTHIA Name: KING, CHRISTAL Name:

Address: 1317 PROVIDENCE DR Address: 5337 N. SOCRUM LOOP #227 City-St-Zip: LAKELAND, FL 33810 City-St-Zip: LAKELAND, FL 33809

Title: VP/S () Delete Title: (X) Change () Addition JENKINS, KATHLEEN Name: BELL, GINA Name:

6606 S. FLORIDA AVE 5337 N. SOCRUM LOOP #227 Address: Address: City-St-Zip: LAKELAND, FL 33813 City-St-Zip: LAKELAND, FL 33809

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

JENKINS, DEMETRIUS Name: Name: 101 WINDSOR LANE Address: Address: City-St-Zip: MULBERRY, FL 33860 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: GINA BELL D 11/15/2006