2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000011487

Name:

Address:

City-St-Zip:

THOMAS, JEANNE

2113 STONECROSS CIR

ORLANDO, FL 32828

FILED Oct 22, 2006 Secretary of State

Entity Name: E4 HOUSECHURCH, INC. **Current Principal Place of Business: New Principal Place of Business:** 2113 STONESCROSS CIR ORLANDO, FL 32828 **Current Mailing Address: New Mailing Address:** 2113 STONESCROSS CIR ORLANDO, FL 32828 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 Current Registered Agent: Name and Address of New Registered Agent: SCHUBERT, DAVID 8615 HAVASU DR ORLANDO, FL 32829 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: DAVID SCHUBERT Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DAUGHERTY, AMY Name: Name: Address: 1031 BARBADOS AVE Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: Title: Title: () Delete () Change () Addition Name: ESALA, JOEL Name: Address: 665 PINE RIVER PL APT 303 Address: City-St-Zip: OVIEDO, FL 32765 City-St-Zip: Title: () Delete Title: () Change () Addition SCHUBERT, DAVID Name: Name: 8615 HAVASU DR Address: Address: City-St-Zip: ORLANDO, FL 32829 City-St-Zip: Title: () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: JEANNE THOMAS MRS 10/22/2006