2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 10, 2007
Secretary of State

DOCUMENT# N05000012615

Entity Name: CHAPLAIN MIKE SMITH MINISTRIES INC

Current Principal Place of Business:

24305 BRANCHWOOD CT
LUTZ, FL 33559

New Principal Place of Business:

18440 SNOWDONIA DR.
LAND O LAKES, FL 34638

Current Mailing Address:

24305 BRANCHWOOD CT
LUTZ, FL 33559

New Mailing Address:

18440 SNOWDONIA DR.
LAND O LAKES, FL 34638

FEI Number: 20-3954850 **FEI Number Applied For ( )** **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:

SMITH, MICHAEL N
24305 BRANCHWOOD CT
LUTZ, FL 33559 US

Name and Address of New Registered Agent:

SMITH, MICHAEL N
18440 SNOWDONIA DR.
LAND O LAKES, FL 34638 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: MICHAEL N. SMITH 10/10/2007
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SMITH, MICHEAL N
Address: 24305 BRANCHWOOD CT
City-St-Zip: LUTZ, FL 33559

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SMITH, MICHEAL N
Address: 18440 SNOWDONIA DR.
City-St-Zip: LAND O LAKES, FL 34638

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: MICHAEL N. SMITH PRES 10/10/2007
Electronic Signature of Signing Officer or Director Date