2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0600000345

Entity Name: CORE MINISTRIES, INC

FILED Oct 15, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 211 11015 SCOTT LOOP RIVERVIEW, FL 33569 RIVERVIEW, FL 33569

Current Mailing Address: New Mailing Address:

P.O. BOX 211 11015 SCOTT LOOP

RIVERVIEW, FL 33569 US RIVERVIEW, FL 33569 US

FEI Number: 20-5444502 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: Name and Address of New Registered Agent:

SPEICHER, KAREN 11015 SCOTT LOOP RIVERVIEW, FL 33569 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: KAREN SPEICHER

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SPEICHER, DAVID
 Name:
 SPEICHER, DAVID

 Address:
 P.O. BOX 211
 Address:
 11015 SCOTT LOOP

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:
 RIVERVIEW, FL 33569

Title: D,VP () Delete Title: D,VP (X) Change () Addition

 Name:
 SPEICHER, KAREN
 Name:
 SPEICHER, KAREN

 Address:
 P.O. BOX 211
 Address:
 11015 SCOTT LOOP

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:
 RIVERVIEW, FL 33569

Title: D,S () Delete Title: D,S (X) Change () Addition

 Name:
 MCKENZIE, WEENA
 Name:
 PAULA, ABRBEENE

 Address:
 P.O. BOX 211
 Address:
 10616 RIVERVIEW

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:
 RIVERVIEW, FL 33578

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: KAREN SPEICHER VP 10/15/2007