

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000004250

FILED  
Jul 30, 2009  
Secretary of State

**Entity Name:** CHANGING LIVES MINISTRY OF JACKSONVILLE, INC.

**Current Principal Place of Business:**

12648 STAVELEY DRIVE S.  
JACKSONVILLE, FL 32225 US

**New Principal Place of Business:**

**Current Mailing Address:**

12648 STAVELEY DRIVE S.  
JACKSONVILLE, FL 32225 US

**New Mailing Address:**

**FEI Number:** 20-4323902

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHISS, MARK VP  
1203 GOVERNORS SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 32301 US

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

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD  
SUITE 101  
TALLAHASSEE, FL 32301 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: MARK WILLIAMS, AVP

07/30/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: JOHNSON, CHRISTOPHER W SR.  
Address: 12648 STAVELEY DRIVE S.  
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: VP ( ) Delete  
Name: JOHNSON, ARLEAN R  
Address: 12648 STAVELEY DRIVE S  
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: JOHNSON, ARLEAN  
Address: 12648 STAVELEY DRIVE S.  
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DIR ( ) Change (X) Addition  
Name: JOHNSON, ARLEAN  
Address: 12648 STAVELEY DRIVE S  
City-St-Zip: JACKSONVILLE, FL 32225 US

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: ARLEAN JOHNSON

PRES

07/30/2009

Electronic Signature of Signing Officer or Director

Date