2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000004825

FILED Dec 22, 2008 Secretary of State

Entity Name: GREATER BLESSINGS CHURCH OF ORLANDO, INC. **Current Principal Place of Business: New Principal Place of Business:** 5101 EDGEWATER DRIVE ORLANDO, FL 32810 **Current Mailing Address: New Mailing Address:** PO BOX 472 CLARCONA, FL 32710 FEI Number: 13-4333075 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: VOLLEY, HENRY A 5260 MACADAMIA CT US ORLANDO, FL 32818 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: SHARON VOLLEY Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete VOLLEY, HENRY A Name: Name: Address: 5260 MACADAMIA CT Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SCOTT, MICHAEL Name: Address: 4241 MINOSO STREET Address: City-St-Zip: ORLANDO, FL 32811 City-St-Zip: Title: () Delete Title: () Change () Addition HENDERSON, GREG Name: Name: 7221 CATAMARAN Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip: Title: DST () Delete Title: () Change () Addition Name: VOLLEY, SHARON Name: 5260 MACADAMIA CT Address: Address: City-St-Zip: ORLANDO, FL 32818 City-St-Zip:

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: SHARON VOLLEY S 12/22/2008