2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 18, 2009
Secretary of State

DOCUMENT# N06000005674

Entity Name: HOPE ALIVE MINISTRIES, INC.

Current Principal Place of Business:

107 ELLISSAR DRIVE
DEBARY, FL 32713

New Principal Place of Business:

Current Mailing Address:

107 ELLISSAR DRIVE
DEBARY, FL 32713

New Mailing Address:

FEI Number: 14-1962271 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
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:

STARLING, JOSEPH
107 ELLISSAR DRIVE
DEBARY, FL 32713 US

Name and Address of New Registered Agent:

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: JOSEPH STARLING
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: CD ( ) Delete
Name: STARLING, JULIA
Address: 107 ELLISSAR DRIVE
City-St-Zip: DEBARY, FL 32713

Title: VCD ( ) Delete
Name: IZQUIERDO, SYLVIA D
Address: 680 BROOKFIELD LOOP
City-St-Zip: LAKE MARY, FL 32746

Title: SD ( ) Delete
Name: HAROLD-GREEN, JOSCELYN
Address: 107 ELLISSAR DRIVE
City-St-Zip: DEBARY, FL 32713

Title: TD ( ) Delete
Name: MITCHELL, SHEROD
Address: 5074 OTTERS DEN TRAIL
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: JOSEPH STARLING PR 09/18/2009
Electronic Signature of Signing Officer or Director — Date