2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 26, 2008
Secretary of State

DOCUMENT# N06000012468

Entity Name: BRIGHT HEART MINISTRIES, INC.

Current Principal Place of Business:

8529 DOUBLE ROCK RD.
POLK CITY, FL 33868

New Principal Place of Business:

1120 S. FLORIDA AVE.
LAKELAND, FL 33803

Current Mailing Address:

8529 DOUBLE ROCK RD.
POLK CITY, FL 33868

New Mailing Address:

1120 S. FLORIDA AVE.
LAKELAND, FL 33803

FEI Number: 20-4210872 **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:

BURNS, ED
8529 DOUBLE ROCK RD.
POLK CITY, FL 33868 US

Name and Address of New Registered Agent:

BURNS, ED
2011 S. FLORIDA AVE
LAKELAND FL., FL 33803 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: ED. BURNS 11/26/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: COLON, RALPH
Address: 8529 DOUBLE ROCK RD.
City-St-Zip: POLK CITY, FL 33868

Title: D ( ) Delete
Name: COLON, ELVA
Address: 8529 DOUBLE ROCK RD.
City-St-Zip: POLK CITY, FL 33868

Title: D ( ) Delete
Name: TOCUYO, OLGA
Address: 3888 NW 67TH WAY
City-St-Zip: LAUDERHILL, FL 33319

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: COLON, RALPH
Address: 900 OLD COMBEE RD.
City-St-Zip: LAKELAND, FL 33805

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: RALPH COLON D 11/26/2008
Electronic Signature of Signing Officer or Director Date