2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000000829

Oct 13, 2008 Secretary of State

Entity Name: FUNDACION DE DESARROLLO SOCIAL MISIONERO, INC.

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

276 SPRING COLONY CIRCLE 1555 SEMORAN BLVD.

ALTAMONTE SPRINGS, FL 32714 1191

WINTER PARK, FL 32792

Current Mailing Address: New Mailing Address:

276 SPRING COLONY CIRCLE 1555 SEMORAN BLVD. 1191

ALTAMONTE SPRINGS, FL 32714

WINTER PARK, FL 32792

FEI Number: 39-2051280 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: Name and Address of New Registered Agent:

RODRIGUEZ, ELAINE G CASANOVA, JON 276 SPRING COLONY CIRCLE 1847 MEADOWGOLD LANE

ALTAMONTE SPRINGS, FL 32714 WINTER PARK, FL 32792 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: JON CASANOVA 10/13/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete RODRIGUEZ, ELAINE G RODRIGUEZ, ELAINE G Name: Name:

276 SPRING COLONY CIRCLE Address: 10151 UNIVERSITY BLVD # 347 Address:

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: ORLANDO, FL 32817

Title: () Delete Title: (X) Change () Addition RODRIGUEZ, DANIEL Name: Name: ULLOA, KETTY

Address: 276 SPRING COLONY CIRCLE Address: 1361 ANDES DRIVE

City-St-Zip: ALTAMONTE SPRINGS, FL 32714 City-St-Zip: WINTER SPRINGS, FL 32708

Title: () Delete Title: (X) Change () Addition HERNANDEZ, YOLANDA T Name: HERNANDEZ, YOLANDA T Name: 2715 SW 92ND AVE Address: Address: 10151 UNIVERSITY BLVD. #347

City-St-Zip: MIAMI, FL 33165 City-St-Zip: ORLANDO, FL 32817

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: ELAINE RODRIGUEZ Ρ 10/13/2008