

2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 21, 2008
Secretary of State

DOCUMENT# N07000001934

Entity Name: ALCONAR RESTORATION MINISTRIES, INC.**Current Principal Place of Business:**4286 WOODBINE ROAD
A & B
PACE, FL 32572**New Principal Place of Business:****Current Mailing Address:**4286 WOODBINE RD
A & B
PACE, FL 32572**New Mailing Address:****FEI Number:** 20-8539270**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BERNARD, LEIGH ANNE
107 WILDFLOWER LANE
PENSACOLA, FL 32514 US**Name and Address of New Registered Agent:**HAMMONS, JOHN R
107 WILDFLOWER LANE
PENSACOLA, FL 32514 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: JOHN R. HAMMONS

04/21/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** P () Delete
Name: BERNARD, LEIGH ANNE
Address: 4286 WOODBINE ROAD
City-St-Zip: PACE, FL 32571**Title:** V () Delete
Name: HAVRANEK, JOHN SR.
Address: 417 COLLINWOOD LOOP
City-St-Zip: FOLEY, AL 36535**Title:** ST (X) Delete
Name: HAMMONS, JOHN R
Address: 20091 LOVER LANE
City-St-Zip: LONG BEACH, MS 39560**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PRES (X) Change () Addition
Name: BERNARD, LEIGH ANNE
Address: 4286 WOODBINE RD
City-St-Zip: PACE, FL 32571**Title:** VPRE (X) Change () Addition
Name: HAMMONS, JOHN R
Address: 4286 WOODBINE RD
City-St-Zip: PACE, FL 32571**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: LEIGH ANNE BERNARD

PRES

04/21/2008

Electronic Signature of Signing Officer or Director

Date