2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000002264

FILED Mar 04, 2009 Secretary of State

Entity Name: BALANCING THE WORD MINISTRY, INC. **Current Principal Place of Business: New Principal Place of Business:** 2261 NW 180 TERRACE MIAMI, FL 33056 **Current Mailing Address: New Mailing Address:** POST OFFICE BOX 835618 HOLLYWOOD, FL 33083 FEI Number: 20-8639188 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: MCKENZIE, MARION 2261 NW 180 TERRACE MIAMI, FL 33056 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: MARION MCKENZIE Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MCKENZIE, MARION Name: Name: Address: POST OFFICE BOX 835618 Address: City-St-Zip: HOLLYWOOD, FL 33083 City-St-Zip: Title: Title: () Delete () Change () Addition Name: MURRAY, SHANIKQUA Name: Address: POST OFFICE BOX 835618 Address: City-St-Zip: HOLLYWOOD, FL 33083 City-St-Zip: Title: () Delete Title: () Change () Addition MCKENZIE, PETER Name: Name: Address: POST OFFICE BOX 835618 Address: City-St-Zip: HOLLYWOOD, FL 33083 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WEEKS, TRELANIE MRS. Name: Address: POST OFFICE BOX 835618 Address: City-St-Zip: HOLLYWOOD, FL 33083 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: MARION MCKENZIE PRES 03/04/2009