2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Jun 29, 2009
Secretary of State

DOCUMENT# N07000004984

Entity Name: LATIN AMERICAN MISSION PARTNERSHIP INC.

Current Principal Place of Business:

614 EAST HIGHWAY 50 222
CLERMONT, FL 34711

New Principal Place of Business:

4904 CAPE HATTERAS DRIVE
CLERMONT, FL 34714

Current Mailing Address:

614 EAST HIGHWAY 50 222
CLERMONT, FL 34711

New Mailing Address:

4904 CAPE HATTERAS DRIVE
CLERMONT, FL 34714

FEI Number: 27-0385877 **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:

SOTO, JR., JOSE
614 EAST HIGHWAY 50 222
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

SOTO, JR., JOSE
4904 CAPE HATTERAS DRIVE
CLERMONT, FL 34714 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: JOSE SOTO JR. 06/29/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SOTO, JR., JOSE
Address: 614 EAST HIGHWAY 50 222
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete
Name: SOTO, III, JOSE
Address: 614 EAST HIGHWAY 50 222
City-St-Zip: CLERMONT, FL 34711

Title: D ( ) Delete
Name: RAMIREZ, FELICIANO F
Address: 614 EAST HIGHWAY 50 222
City-St-Zip: CLERMONT, FL 34711

Title: D (X) Delete
Name: GUTIERREZ, FIDEL
Address: 614 EAST HIGHWAY 50 222
City-St-Zip: CLERMONT, FL 34711

Title: D (X) Delete
Name: HART, MICHAEL V
Address: 614 EAST HIGHWAY 50 222
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SOTO, JR., JOSE
Address: 4904 CAPE HATTERAS DRIVE
City-St-Zip: CLERMONT, FL 34714

Title: V (X) Change ( ) Addition
Name: SOTO, III, JOSE
Address: 4904 CAPE HATTERAS DRIVE
City-St-Zip: CLERMONT, FL 34714

Title: S (X) Change ( ) Addition
Name: RAMIREZ, FELICIANO F
Address: 247 BOCA CIEGA
City-St-Zip: MASCOTTE, FL 34753

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: JOSE SOTO JR. P 06/29/2009
Electronic Signature of Signing Officer or Director Date