2008 NOT-FOR-PROFIT CORPORATION

Apr 07, 2008 8:00 am Secretary of State **DOCUMENT # N07000009014** 04-07-2008 90055 003 ****61.25 THE PURSUIT CHRISTIAN CHURCH CORPORATION Principal Place of Business Mailino Address 12500 SOUTHWEST 20TH ST 12500 SOUTHWEST 20TH ST MIRAMAR, FL 33027 MIRAMAR, FL 33027 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01142008 Chg-NP CR2E037 (12/06) City & State City & State Applied For 4. FEI Number 26 - 1087269 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MEHAFFEY, MATT Street Address (P.O. Box Number is Not Acceptable) 12500 SOUTHWEST 20TH ST MIRAMAR, FL 33027 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent aignature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Due by May 1, 2008 Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE TITLE ■ Addition Senier Pastor Winder ☐ Delete Change NAME MATT Meta ffee 125 00 500 200 STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIP Miramar 33027 Director TITLE ☐ Delete ☐ Change ☐ Addition NAME Dan Donaldson NAME P.O. BOX951719 Lake Mary, FL 32095-171 STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP TITLE DIRECTOR TITLE Change ■ Addition NAME Brent Foolks STREET ADDRESS STREET ADDRESS Schene tady N CITY-ST-ZIP CITY-ST-ZIP TITLE Director ☐ Change ☐ Addition Bob Smith NAME NAME 1201 SW 141 AVE \$123 1201 SW 141 AVE \$123027 STREET ADDRESS STREET AODRESS CITY-ST-ZIP CITY-ST-ZIP TITLE mike tooley Director TITLE ☐ Change Addition NAME NAME 7951 Preservation Dr STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P Indianapolis, In 46278 TITLE DH F ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

954.632.2011

FILED