

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000011692

FILED
Nov 15, 2009
Secretary of State

Entity Name: HIS KINGDOM COME MINISTRIES, INC.

Current Principal Place of Business:

20714 CHESTNUT ST
DUNNELLON, FL 34431

New Principal Place of Business:

Current Mailing Address:

20714 CHESTNUT ST
DUNNELLON, FL 34431

New Mailing Address:

FEI Number: 26-1538944

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMAN, MARISOL
20714 CHESTNUT ST
DUNNELLON, FL 34431 US

Name and Address of New Registered Agent:

ROBINSON, MYRTICE E
20714 CHESTNUT ST
DUNNELLON, FL 34431 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: MYRTICE E. ROBINSON

11/15/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ELD () Delete
Name: ROBINSON, MYRTICE E
Address: 9178 N COMMODORE DR
City-St-Zip: CITRUS SPRINGS, FL 34434

Title: ELD () Delete
Name: ROBINSON, DALLAS
Address: 9178 N COMMODORE DR
City-St-Zip: CITRUS SPRINGS, FL 34434

Title: D () Delete
Name: COHEN, ROBERT A
Address: 111 W MAIN ST SUITE 207
City-St-Zip: INVERNESS, FL 34450

Title: D () Delete
Name: ROMAN, MARISOL
Address: 20712 CHESTNUT STREET
City-St-Zip: DUNNELLON, FL 34431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RUTH, MONICA A
Address: 116 CLEVELAND AVE.
City-St-Zip: PALATKA, FL 32177

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: MYRTICE E. ROBINSON

ELD

11/15/2009

Electronic Signature of Signing Officer or Director

Date