## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N08000003164

Entity Name: MERCY DRIVE MINISTRIES, INC.

FILED Dec 01, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1531 MERCY DRIVE ORLANDO, FL 32808

Current Mailing Address: New Mailing Address:

1531 MERCY DRIVE ORLANDO, FL 32808

FEI Number: 26-2811941 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ANDREWS, WILLIAM 2323 S. WESTMORELAND DRIVE ORLANDO, FL 32805 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: WILLIAM ANDREWS

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 ANDREWS, WILLIAM
 Name:

 Address:
 2323 S. WESTMORELAND DRIVE
 Address:

 City-St-Zip:
 ORLANDO, FL 32805
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 ANDREWS, ROSIE
 Name:

 Address:
 2323 S. WESTMORELAND DRIVE
 Address:

 City-St-Zip:
 ORLANDO, FL 32805
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

Name: STAPLETON, RHONDA Name:
Address: 1219 22ND STREET Address:
City-St-Zip: ORLANDO, FL 32805 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GUNTER, GLENN
 Name:

 Address:
 515 S. PHELPS AVE.
 Address:

 City-St-Zip:
 WINTER PARK, FL 32789
 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: WILLIAM ANDREWS DIR. 12/01/2009