2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000009766

FILED Oct 15, 2009 Secretary of State

Entity Name: RESTORATION FAMILY CHURCH OF THE ASSEMBLIES OF GOD INC.

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

3330 SKYVIEW DRIVE LAKELAND, FL 33801

Current Mailing Address: New Mailing Address:

3330 SKYVIEW DRIVE PO BOX 1715

LAKELAND, FL 33801 EATON PARK, FL 33840

FEI Number: 26-4777555 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:

UNITED STATES CORPORATION AGENTS, INC. GOODSON, KHANE D TREASUR 13302 WINDING OAKS BLVD 2919 MAINE AVE

LAKELAND, FL 33801 SUITE A-100 US

TAMPA, FL 33612 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: KHANE GOODSON 10/15/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

THOMAS, LEE E REVELL, DAVID Name: Name: Address: 529 WORCHESTER CT Address: 1200 BURLINGTON CT City-St-Zip: LAKELAND, FL 33809 City-St-Zip: AUBURNDALE, FL 33823

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

LAGUERRA, ENEIDA Name: Name: Address: 2631 SUNSHINE DRIVE SOUTH Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

GOODSON, KHANE Name: GOODSON, KHANE Name: 2919 MANINE AVE 2919 MAINE AVE Address: Address: City-St-Zip: EATON PARK, FL 33840 City-St-Zip: EATON PARK, FL 33840

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: KHANE GOODSON **TREA** 10/15/2009