2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 29, 2009
Secretary of State

DOCUMENT# N08000009779

Entity Name: PARENTS & FRIENDS MINISTRIES, INC.

Current Principal Place of Business:

1551 NORTH FLAGLER DRIVE
SUITE 505
WEST PALM BEACH, FL 33401

New Principal Place of Business:

248 E. LAKEWOOD ROAD
WEST PALM BEACH, FL 33405

Current Mailing Address:

1551 NORTH FLAGLER DRIVE
SUITE 505
WEST PALM BEACH, FL 33401

New Mailing Address:

248 E. LAKEWOOD ROAD
WEST PALM BEACH, FL 33405

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PAYNE, JOSHUA A
120 S. OLIVE AVENUE
SUITE 500
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

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: JOSHUA A. PAYNE
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P ( ) Change (X) Addition
Name: FALZARANO, ANTHONY A
Address: 248 E. LAKEWOOD ROAD
City-St-Zip: WEST PALM BEACH, FL 33405

Title: D ( ) Change (X) Addition
Name: ELLER, ANTHONY
Address: 1927 BYRD ROAD
City-St-Zip: VIENNA, VA 22182

Title: D ( ) Change (X) Addition
Name: FALZARANO, MARY VICTORIA
Address: 248 E. LAKEWOOD ROAD
City-St-Zip: WEST PALM BEACH, FL 33405

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: ANTHONY A. FALZARANO PRES 10/29/2009
Electronic Signature of Signing Officer or Director — Date