

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000011317

FILED
Oct 09, 2009
Secretary of State

Entity Name: HOLY DISCIPLES OF CHRIST OUTREACH MINISTRIES INC.

Current Principal Place of Business:

6126 NW 26TH STREET
GAINESVILLE, FL 32641

New Principal Place of Business:

6126 NW 26TH STREET
GAINESVILLE, FL 32653

Current Mailing Address:

6126 NW 26TH STREET
GAINESVILLE, FL 32641

New Mailing Address:

6126 NW 26TH STREET
GAINESVILLE, FL 32653

FEI Number: 80-0374895 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:

MILLER, BETSY E
6126 NW 26TH STREET
GAINESVILLE, FL 32641 US

Name and Address of New Registered Agent:

MILLER, BETSY E
6126 NW 26TH STREET
GAINESVILLE, FL 32653 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: BETSY E MILLER

10/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MILLER, BETSY E
Address: 6126 NW 26TH STREET
City-St-Zip: GAINESVILLE, FL 32641

Title: S () Delete
Name: ROBINSON, NAVONA
Address: 6126 NW 26TH STREET
City-St-Zip: GAINESVILLE, FL 32641

Title: T () Delete
Name: ROBINSON, TASHIKA
Address: 5620 NW 34TH ST. APT. 6
City-St-Zip: GAINESVILLE, FL 32641

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MILLER, BETSY E
Address: 6126 NW 26TH STREET
City-St-Zip: GAINESVILLE, FL 32653

Title: S (X) Change () Addition
Name: ROBINSON, NAVONA
Address: 6126 NW 26TH STREET
City-St-Zip: GAINESVILLE, FL 32653

Title: T (X) Change () Addition
Name: ROBINSON, TASHIKA
Address: 5620 NW 34TH ST. APT. 6
City-St-Zip: GAINESVILLE, FL 32653

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: BETSY E MILLER

P

10/09/2009

Electronic Signature of Signing Officer or Director

Date