

# **2012 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N10000001436

**FILED**  
**Oct 02, 2012**  
**Secretary of State**

**Entity Name:** MIRACLE LIFE CHURCH, INC.

**Current Principal Place of Business:**

510 DOUGLAS RD., STE 1027  
ORLANDO, FL 32714

**New Principal Place of Business:**

238 MIRAMAR AVE  
DAVENPORT, FL 33897

**Current Mailing Address:**

510 DOUGLAS RD., STE 1027  
ORLANDO, FL 32714

**New Mailing Address:**

238 MIRAMAR AVE  
DAVENPORT, FL 33897

**FEI Number:** 27-1756931

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAMMONS, PETER DR.  
510 DOUGLAS RD., STE 1027  
ORLANDO, FL 32714 US

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

GAMMONS, DR. PETER  
238 MIRAMAR AVE  
DAVENPORT, FL 33897 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: PETER GAMMONS

10/02/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: GAMMONS, PETER J  
Address: 238 MIRAMAR AVE  
City-St-Zip: DAVENPORT, FL 33897

Title: D  
Name: RAMPERSAD, ROBIN  
Address: 3020 PALERMO CT  
City-St-Zip: MT DORA, FL 32757

Title: ST  
Name: WHITE, TROY  
Address: 4131 CROSSEN DR  
City-St-Zip: ORLANDO, FL 32822

I hereby 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 all other like empowered.

SIGNATURE: PETER J GAMMONS

PRES

10/02/2012

Electronic Signature of Signing Officer or Director

Date