2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N22615

FILED Nov 25, 2008 Secretary of State

Entity Name: HOBE SOUND BIBLE CHURCH, INC.

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

11295 SE GOMEZ HOBE SOUND, FL 33455

Current Mailing Address: New Mailing Address:

P.O. BOX 1065 HOBE SOUND, FL 33475

FEI Number: 59-2772823 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

WOLFE, PAUL WOLFE, PAUL

8440 SE DHARLYS STREET 11295 SE GOMEZ AVE.

HOBE SOUND, FL 33455 US HOBE SOUND, FL 33455 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: PAUL WOLFE 11/25/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 WOLFE, PAUL,
 Name:
 WOLFE, PAUL,

 Address:
 8440 SE DHARLYS STREET
 Address:
 11295 SE GOMEZ AVE

 City-St-Zip:
 HOBE SOUND, FL 33455
 City-St-Zip:
 HOBE SOUND, FL 33455

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

 Name:
 FINNEY, BRUCE
 Name:

 Address:
 11472 SE ELLA AVE
 Address:

 City-St-Zip:
 HOBE SOUND, FL 33455
 City-St-Zip:

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

 Name:
 JONES, JOHN
 Name:

 Address:
 P.O. BOX 11305 SE GOMEZ AVE
 Address:

 City-St-Zip:
 HOBE SOUND, FL
 City-St-Zip:

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

 Name:
 BUDENSIEK, JOHN M SR.
 Name:

 Address:
 8967 SE PINE CONE LN
 Address:

 City-St-Zip:
 HOBE SOUND, FL
 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: JOHN M. BUDENSIEK, SR. T 11/25/2008