## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N23180

FILED Oct 12, 2009 Secretary of State

Entity Name: BOB NUTTING MINISTRIES, INC.

**Current Principal Place of Business: New Principal Place of Business:** %ROBERT E. NUTTING 1801 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32805 **New Mailing Address: Current Mailing Address:** %ROBERT E. NUTTING 1801 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32805 FEI Number: 59-2855260 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: NUTTING, ROBERT E 1801 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32805 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: ROBERT E NUTTING Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition EVANS, RANDALL JR Name: Name: 19536 COUNTY RD 459 Address: Address: City-St-Zip: CLERMONT, FL City-St-Zip: Title: () Delete Title: () Change () Addition NUTTING, ROBERT E Name: Name: Address: 5400 BALBOA DRIVE Address: City-St-Zip: ORLANDO, FL 32808 City-St-Zip: ( ) Delete Title: Title: () Change () Addition LILLY, GENE Name: Name: Address: P.O. BOX 487 Address: City-St-Zip: CAPE CANAVEITAL, FL 32920 City-St-Zip: Title: Title: () Change () Addition ( ) Delete Name: BART, BIDDLE Name: Address: 2300 JET POINT DR. Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: Title: VPD (X) Delete Title: () Change () Addition DAVIS, JOSEPH B Name: Name: 623 MANSFIELD ST. Address: Address: ALTAMONTE SPRINGS, FL 32701 City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition JOOSTE, MARTIN Name: Name: Address: 1801 SOUTH ORANGE 131ST TR Address: ORLANDO, FL 32805 City-St-Zip: 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: ROBERT E NUTTING PRES 10/12/2009