


2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N29166 1. Entity Name KOREAN BAPTIST CHURCH OF GAINESVILLE, INC.	
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FILED
08 DEC -2 AM 9: 39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 5200 SW 63RD BLVD GAINESVILLE, FL 32608	Mailing Address 5200 SW 63RD BLVD GAINESVILLE, FL 32608
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
SOHN, HEE Y 5200 NW 63RD BLVD GAINESVILLE, FL 32608		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Hee Young Sohn HEE YOUNG SOHN. DATE: 11/23/2008

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$61.25 After January 1, 2009, Fee will be \$122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	CTR SOHN, MIN-SEOK <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8944 SW 64TH LANE	NAME	12/02/08--01024--013 **61.25
STREET ADDRESS	GAINESVILLE, FL 32608	STREET ADDRESS	700138379057
CITY-ST-ZIP		CITY-ST-ZIP	12/02/08--01024--013 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	TR YUN, CHI-HONG <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8450 SW 15TH LANE	NAME	
STREET ADDRESS	GAINESVILLE, FL 32608	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	TR LEE, YONGJOON <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8613 SW 10TH RD	NAME	
STREET ADDRESS	GAINESVILLE, FL 32607	STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Min-Seok Sohn MIN-SEOK SOHN DATE: 11/23/08 352-328-4040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #