

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N34255

FILED  
Nov 13, 2007  
Secretary of State

**Entity Name:** RESURRECTION RANCH MINISTRIES, INC.

**Current Principal Place of Business:**

5925 OLD DIXIE HWY  
MELBOURNE, FL 32940 US

**New Principal Place of Business:**

**Current Mailing Address:**

427 TIMBERLAKE DRIVE  
MELBOURNE, FL 32940 US

**New Mailing Address:**

PO BOX 411423  
MELBOURNE, FL 32941 US

**FEI Number:** 59-2981892

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRADLEY, FRANCIS M  
427 TIMBERLAKE DRIVE  
MELBOURNE, FL 32940 US

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

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: ARLENE COULTER

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: COULTER, ARLENE  
Address: 5925 OLD DIXIE HWY  
City-St-Zip: MELBOURNE, FL 32940 US

Title: D ( ) Delete  
Name: LEES, DON  
Address: 745 GREENWOOD MANOR CIR  
City-St-Zip: WEST MELBOURNE, FL 32904 US

Title: VSD ( ) Delete  
Name: BRADLEY, FRANK  
Address: 427 TIMBERLAKE DRIVE  
City-St-Zip: MELBOURNE, FL 32940 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ARLENE COULTER

PD

11/13/2007

Electronic Signature of Signing Officer or Director

Date