2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N43827

FILED May 12, 2007 Secretary of State

Entity Nai	me: INTIMACY HOUSE OF PRAYER, INC.			
Current Principal Place of Business:		New Principal Pla	New Principal Place of Business:	
1644 NE 22ND AVENUE, BUILDING B OCALA, FL 34470			759 NW MARTHIN LUTHER KING BLVD. OCALA, FL 34475	
Current Mailing Address:		New Mailing Add	New Mailing Address:	
1644 NE 22ND AVENUE, BUILDING B OCALA, FL 34470		2870 NE 202 TER WILLISTON, FL 3	2870 NE 202 TER WILLISTON, FL 32696	
	: 59-3077638 FEI Number Applied For() Fice with s. 607.193(2)(b), F.S., the corporation did not rec	El Number Not Applicable() ceive the prior notice.	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent:	Name and Addres	ss of New Registered Agent:	
OCALA, F	8TH STREET L 34475 US named entity submits this statement for the purp e of Florida.	ose of changing its regist	tered office or registered agent, or both,	
SIGNATU	RE: WILLIE FOSTER JR.			
	Electronic Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () Delete FOSTER, WILLIE JR 1324 NW 8TH STREET OCALA, FL 34475	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SD () Delete FOSTER, PARRIE 1324 NW 8TH STREET OCALA, FL 34475	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () Delete NEWSON, NAPOLIEON 2051 SW 7TH PL OCALA, FL 34474	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delete HARRIS, CURTIS L 2870 NE 202 TER WILLISTON, FL 32696	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delete STEVENSON, ROBERT T 740 NW 66TH PLACE OCALA, FL 34475	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: CURTIS HARRIS VD 05/12/2007