

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N44890

FILED  
Nov 25, 2009  
Secretary of State

**Entity Name:** FAMILY CHRISTIAN FELLOWSHIP, INC.

**Current Principal Place of Business:**

1775 SOUTH FLAMINGO RD  
DAVIE, FL 33325 US

**New Principal Place of Business:**

**Current Mailing Address:**

1775 SOUTH FLAMINGO RD  
DAVIE, FL 33325 US

**New Mailing Address:**

**FEI Number:** 65-0277723 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

MAURO, GARY  
1451 NW 167TH AVE  
PEMBROKE PINES, FL 33028 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: GARY MAURO

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: MAURO, GARY  
Address: 1451 NW 167TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D ( ) Delete  
Name: WINTERS, MARK  
Address: 1739 HAZALTON AVE  
City-St-Zip: DELTONA, FL 32738

Title: D ( ) Delete  
Name: BUCK, GEOFF  
Address: 2401 W CYPRESS CREEK RD  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D ( ) Delete  
Name: LAYMON, DOUG  
Address: 510 S. LYNNWOOD TRAIL  
City-St-Zip: CEDAR PARK, TX 78613

**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:

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: GARY MAURO

DP

11/25/2009

Electronic Signature of Signing Officer or Director

Date