

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N46939

FILED
Nov 26, 2008
Secretary of State

Entity Name: NETWORK MINISTRIES, INC.

Current Principal Place of Business:

1237 TALBOT AVE.
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

1237 TALBOT AVE.
TALLAHASSEE, FL 32308 US

New Mailing Address:

FEI Number: 59-3106602 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRITTON, TRACY
1237 TALBOT AVE.
TALLAHASSEE, FL 32308 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: TRACY BRITTON

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRITTON, GEORGE
Address: 1237 TALBOT AVE.
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: VP () Delete
Name: BIRCH, STEPHEN
Address: 1434-C FISHER LANE
City-St-Zip: TALLAHASSEE, FL 32301

Title: S () Delete
Name: BRITTON, TRACY
Address: 1237 TALBOT AVE.
City-St-Zip: TALLAHASSEE, FL 32308 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: TRACY BRITTON

S

11/26/2008

Electronic Signature of Signing Officer or Director

Date