

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 20, 2004
Secretary of State**

DOCUMENT# N95000000285

Entity Name: SONSHINE ASSOCIATION OF CHRISTIAN SCHOOLS, INC.

Current Principal Place of Business:

6029 KINGSWOOD DRIVE
MILTON, FL 32570

New Principal Place of Business:

Current Mailing Address:

6029 KINGSWOOD DRIVE
MILTON, FL 32570

New Mailing Address:

FEI Number: 59-1147370 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

BRAINARD, B. TOD
6029 KINGSWOOD DRIVE
MILTON, FL 32570 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SETSER, RONALD H
Address: 4090 78TH AVE.N.
City-St-Zip: PINELLAS PARK, FL 33781

Title: TD () Delete
Name: JUDICE, JOE
Address: 12349 79TH PL
City-St-Zip: SEMINOLE, FL 33772

Title: T () Delete
Name: THOMAS, WILLIAM
Address: 782 LYDALE N.
City-St-Zip: ST. PETE, FL

Title: TD (X) Delete
Name: LEATHERMAN, ART
Address: 93262 CIRCLE DR #262
City-St-Zip: PINELLAS PARK, FL 33782

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOBBS, R. DAYTON
Address: P.O. BOX 643
City-St-Zip: MILTON, FL 32572

Title: S/T (X) Change () Addition
Name: OPAGER, LUDWIG
Address: 6000 OPAGER LN.
City-St-Zip: MILTON, FL 32570

Title: VP (X) Change () Addition
Name: BRAINARD, B. TOD
Address: 6029 KINGSWOOD DRIVE
City-St-Zip: MILTON, FL 32570

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: B. TOD BRAINARD

VP

10/20/2004

Electronic Signature of Signing Officer or Director

Date