2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000000644

FILED Oct 22, 2004 Secretary of State

Entity Name: RAINBOW LAKES UNITED METHODIST CHURCH INC.

New Principal Place of Business: Current Principal Place of Business: 19656 SW BEACH BLVD. DUNNELLON, FL 34431 **Current Mailing Address: New Mailing Address:** 19656 SW BEACH BLVD DUNNELLON, FL 34431 FEI Number: 59-2156231 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: GENTRY, ROBERT HENION, ROBIN R 3675 SW POMPANO 21280 SW MARINE BLVD DUNNELLON, FL 34431 US DUNNELLON, FL 34431 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: ROBIN R HENION 10/22/2004 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GENTRY, ROBERT Name: Name: Address: 3675 SW POMPANO Address: City-St-Zip: DONNELLIN, FL 34431 City-St-Zip: Title: () Delete Title: () Change () Addition Name: RICHIE, CALVIN Name: Address: 4280 SW DEEPWATER CT Address: City-St-Zip: DUNNELLON, FL 34431 City-St-Zip: Title: () Delete Title: () Change () Addition MOWREY, CHARLES Name: Name: 10775 SW 186 CIRCLE Address: Address: City-St-Zip: DUNNELLON, FL 34432 City-St-Zip: Title: TD () Delete Title: () Change () Addition Name: HENION, ROBIN Name: 21280 SW MARINE BLVD Address: Address: City-St-Zip: DUNNELLON, FL 34431 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: ROBIN R HENION TD 10/22/2004