

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000000771

FILED
Jan 06, 2006
Secretary of State

Entity Name: SERVANTS UNITED IN CHRIST'S CHURCH OF LEE COUNTY, INC.

Current Principal Place of Business:

1243 VERONICA SHOMAKEN BLVD
FORT MYERS, FL 33916 US

New Principal Place of Business:

1243 VERONICA SHOMAKER BLVD
FORT MYERS, FL 33916 US

Current Mailing Address:

P.O. BOX 50835
FT MYERS, FL 33994

New Mailing Address:

1243 VERONICA SHOEMAKER BLVD
FT MYERS, FL 33916

FEI Number: 65-0651175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNES, MICHAEL SR
1764 GLENWAY COURT
FORT MYERS, FL 33916 US

Name and Address of New Registered Agent:

BARNES, MICHAEL SR
3034 ST CHARLES ST
FORT MYERS, FL 33916 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: MICHAEL BARNES SR

01/06/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARNES, MICHAEL SR
Address: 3034 ST. CHARLES ST.
City-St-Zip: FT MYERS, FL 33916

Title: TD () Delete
Name: HAGAN, JACQUELINE
Address: 3002 KAREN AVE S
City-St-Zip: LEHIGH ACRES, FL 33971

Title: SD () Delete
Name: BARNES, MILDRED
Address: 3034 ST CHARLES ST.
City-St-Zip: FT MYERS, FL 33916

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 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: JACQUELINE HAGAN

TD

01/06/2006

Electronic Signature of Signing Officer or Director

Date