2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000001667

Title:

Name:

Address:

City-St-Zip:

7000WIENT#1N90000001007

FILED Oct 07, 2006 Secretary of State

Entity Name: HANDS OF GOD MINISTRIES, INC. **Current Principal Place of Business: New Principal Place of Business:** 2918 E 27TH AVE TAMPA, FL 33605 US **Current Mailing Address: New Mailing Address:** 2918 E 27TH AVE TAMPA, FL 33605 US FEI Number: 59-3379973 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: FERGUSON, CLAYTON BISHOP FERGUSON, CLAYTON BISHOP 7514 N HALE AVE 11859 BESSIE DIX RD TAMPA, FL 33614 US US SEFFNER, FL 33584 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: CLAYTON FERGUSON JR. 10/07/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PEARSON, MARK Name: Name: 12212 KNOLTY PINE LOOP Address: Address: City-St-Zip: SAN ANTONIO, FL 33576 City-St-Zip: Title: Title: () Delete () Change () Addition CAMPBELL, JEFFERY ANN Name: Name: Address: 3501 E. 33RD AVE. Address: City-St-Zip: TAMPA, FL 33610 City-St-Zip: Title: () Delete Title: (X) Change () Addition FERGUSON, DOROTHY Name: FERGUSON, DOROTHY Name: 7514 N HALE AVE 11529 BESSIE DIX RD Address: Address: City-St-Zip: TAMPA, FL 33614 City-St-Zip: SEFFNER, FL 33584 Title: DS () Delete Title: () Change () Addition Name: TAYLOR, CHARLENE Name: Address: 6421 N 41ST ST Address: City-St-Zip: TAMPA, FL 33610 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: CLAYTON FERGUSON, JR. CEO 10/07/2006

() Delete

BLACK, MARION

TAMPA, FL 33607

2202 N ARMENIA AVE

() Change () Addition