2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000002147

Entity Name: LARRY D. FORD MINISTRIES, INC.

FILED Oct 12, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11000 METRO PKWY #1A 11000 METRO PKWY #1A FORT MYERS, FL 33912 FORT MYERS, FL 33966 12 **Current Mailing Address: New Mailing Address:** 11000 METRO PKWY #1A 11000 METRO PKWY #1A FORT MYERS, FL 33912 FORT MYERS, FL 33966 12 FEI Number: 65-0683777 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: FORD, SHERRYL FORD, LARRY 18210 SANDY PINES CIRCLE 18210 SANDY PINES CIRCLE FORT MYERS, FL 33917 FORT MYERS, FL 33917 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: LARRY FORD 10/12/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition MELVIN, RICHARD Name: Name: 33 SHERIDAN RD Address: Address: City-St-Zip: POLAND, OH 44514 City-St-Zip: Title: DST () Delete Title: () Change () Addition SCHWARTZ, LESA Name: Name: Address: 10809 ARROW TREE BLVD Address: City-St-Zip: CLERMONT, FL 34715 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition FORD, SHERRYL Name: Name: 18210 SANDY PINES CIRCLE Address: Address: City-St-Zip: FT MYERS, FL 33917 City-St-Zip: (X) Change () Addition Title: () Delete Title: Name: CASH, THOMAS Name: CASH, THOMAS 2111 SW 48TH TERR 12848 HAVENRIDGE CIRCLE Address: Address: City-St-Zip: CAPE CORAL, FL 33914 City-St-Zip: FORT MYERS, FL 33912 Title: () Delete Title: () Change () Addition MAXWELL, CATHY Name: Name: P.O. BOX 805 Address: Address: City-St-Zip: SANIBEL, FL 33957 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: LARRY FORD PRES 10/12/2006

() Delete

FORT MYERS, FL 33912

11520 PLANTATION PRESERVE CIRCLE

VEGA, JOEL

Title:

Name:

Address:

City-St-Zip:

() Change () Addition