

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000002713

FILED
Sep 12, 2007
Secretary of State

Entity Name: AMBASSADORS FOR CHRIST EVANGELISTIC MINISTRIES, INC.

Current Principal Place of Business:

2020 NE 4TH AVE
GAINESVILLE, FL 32609

New Principal Place of Business:

6626 NW 32ND STREET
GAINESVILLE, FL 32653

Current Mailing Address:

P O BOX 5393
GAINESVILLE, FL 32627 US

New Mailing Address:

P.O. BOX 1021
GAINESVILLE, FL 32602 US

FEI Number: 59-3390542 **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:

WHITE, ERNEST
6626 NW 32ND STREET
GAINESVILLE, FL 32653 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: ERNEST WHITE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WHITE, ERNEST
Address: 6626 NW 32ND STREET
City-St-Zip: GAINESVILLE, FL 32653

Title: D () Delete
Name: ALFORD, KAREN
Address: 2941 NW 68TH AVE.
City-St-Zip: GAINESVILLE, FL 32653

Title: ESD () Delete
Name: DUNN-WHITE, PATRICIA A
Address: 6626 NW 32ND STREET
City-St-Zip: GAINESVILLE, FL 32653

Title: O () Delete
Name: ROLLINS, RENEE
Address: 17027 NW 46TH AVENUE
City-St-Zip: NEWBERRY, FL 32669

Title: D () Delete
Name: THOMAS, JAMES
Address: 6414 NE 27TH AVE
City-St-Zip: GAINESVILLE, FL 32609

Title: D () Delete
Name: WILLIAMS-JORDAN, NAOMI
Address: 1001 SE 19TH ST
City-St-Zip: GAINESVILLE, FL 32642

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:

Title: () Change () Addition
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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 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: ERNEST WHITE

PD

09/12/2007

Electronic Signature of Signing Officer or Director

Date