

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N97000001800

FILED
Feb 26, 2009
Secretary of State

Entity Name: THE REMNANT CHURCH INTERNATIONAL TRUST, INC.

Current Principal Place of Business:

4242 E MILLER
TAMPA, FL 33617

New Principal Place of Business:

6503 ARUBA AVE
2403
TAMPA, FL 33637

Current Mailing Address:

P.O. BOX 75431
TAMPA, FL 33675

New Mailing Address:

FEI Number: 59-3441812 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:

GALLON, ALFONSO
2709 E 12TH AVE
TAMPA, FL 33605 US

Name and Address of New Registered Agent:

GALLON, ALFONSO
6503 ARUBA AVE
TEMPLE TERRACE, FL 33637 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: ALFONSO GALLON

02/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GALLON, ALFONSO
Address: 2709 E 12TH AVE
City-St-Zip: TAMPA, FL 33605

Title: M () Delete
Name: GOGGINS, THEODIS
Address: 903 MAYDELL CT.
City-St-Zip: TAMPA, FL 33619

Title: M () Delete
Name: HOLDER, DORETHA
Address: 2709 12TH AVE
City-St-Zip: TAMPA, FL 33605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GALLON, ALFONSO
Address: 6503 ARUBA AVE
City-St-Zip: TEMPLE TERRACE, FL 33637

Title: T (X) Change () Addition
Name: GOGGINS, THEODIS III
Address: 741 CALIENTE DR.
City-St-Zip: BRANDON, FL 33511

Title: M (X) Change () Addition
Name: MAYS, SUSAN
Address: 4209 W.LASALLE
City-St-Zip: TAMPA, FL 33607

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: ALFONSO GALLON

PD

02/26/2009

Electronic Signature of Signing Officer or Director

Date