2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 28, 2011
Secretary of State

DOCUMENT# N98000001130

Entity Name: OPEN ARMS CHRISTIAN FELLOWSHIP, INC.

Current Principal Place of Business:

2763 DUNN AVENUE
JACKSONVILLE, FL 32218

New Principal Place of Business:

Current Mailing Address:

2763 DUNN AVENUE
JACKSONVILLE, FL 32218

New Mailing Address:

FEI Number: 59-3498529 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMAS, LEOFRIC W
2763 DUNN AVENUE
JACKSONVILLE, FL 32218 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: LEOFRIC W THOMAS SR.
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CD
Name: THOMAS, LEOFRIC W SR.
Address: 4884 YACHT BASIN DR.
City-St-Zip: JACKSONVILLE, FL 32277

Title: PD
Name: THOMAS, SANDY L
Address: 4884 YACHT BASIN DR.
City-St-Zip: JACKSONVILLE, FL 32277

Title: VP
Name: SAPP, DEBBIE
Address: 12617 SAMPSON ROAD
City-St-Zip: JACKSONVILLE, FL 32218

Title: T
Name: WRIGHT, MICHAEL
Address: 226 WEST 11TH STREET
City-St-Zip: JACKSONVILLE, FL 32206

Title: S
Name: MURRAY, KAREN
Address: 5852 COPPER CREEK DRIVE
City-St-Zip: JACKSONVILLE, FL 32218

I hereby 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 all other like empowered.

SIGNATURE: KAREN MURRAY S 10/28/2011
Electronic Signature of Signing Officer or Director Date