

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N98000002855

FILED
Mar 22, 2006
Secretary of State

Entity Name: RESTORATIVE JUSTICE MINISTRY NETWORK OF FLORIDA, INC.

Current Principal Place of Business:

17290 REWIS ROAD
ALVA, FL 33920

New Principal Place of Business:

Current Mailing Address:

PO BOX 1001
ALVA, FL 33920

New Mailing Address:

FEI Number: 59-3504589

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOOD, RANDOLPH
17290 REWIS ROAD
ALVA, FL 33920 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: RANDOLPH WOOD

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: WOOD, RANDOLPH
Address: 17290 REWIS ROAD
City-St-Zip: ALVA, FL 339200045

Title: PD () Delete
Name: CROCKET, DICK
Address: 17290 REWIS ROAD (P.O BOX 1001)
City-St-Zip: ALVA, FL 33920

Title: D () Delete
Name: GLENN, JOHN
Address: 7000 SE 128TH AVE.
City-St-Zip: OKEECHOBEE, FL 34974

Title: VPD () Delete
Name: SOLOMAN, EMMETT
Address: 1232 AVENUE J
City-St-Zip: HUNTSVILLE, TX 77340

Title: D () Delete
Name: NELSON, AUDRA
Address: 4074 RAINBOW CIR. (P.O. BOX 2264)
City-St-Zip: LABELLE, FL 33975

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: CROCKETT, DICK
Address: 17290 REWIS ROAD (P.O BOX 1001)
City-St-Zip: ALVA, FL 33920

Title: () Change () Addition
Name:
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 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: DICK CROCKETT

PD

03/22/2006

Electronic Signature of Signing Officer or Director

Date