2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Nov 20, 2009
Secretary of State

DOCUMENT# N99000000154

Entity Name: LEARNING INCREASES FUTURE ENTREPRENEURS COMMUNITY CENTER, INCORPORATED

Current Principal Place of Business:

800 NW 39 AVENUE
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

800 NW 39 AVENUE
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 59-3554500 **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:

JESUS PEOPLE LIFE CHANGING CHURCH INC
800 NW 39 AVENUE
GAINESVILLE, FL 32609 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: HORACE L. MINGO

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: MINGO, HORACE L
Address: 4940 NW 51ST PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: VDTS ( ) Delete
Name: MINGO, LURETHA
Address: 4940 NW 51ST PLACE
City-St-Zip: GAINESVILLE, FL 32606

Title: TSD ( ) Delete
Name: ROLLINS, JOHN
Address: 2808 NW 128TH ROAD
City-St-Zip: GAINESVILLE, FL 32609

Title: TSD ( ) Delete
Name: COOPER, MICHELLE
Address: 4000 NW 51ST STREET APT M229
City-St-Zip: GAINESVILLE, FL 32606

Title: TSD ( ) Delete
Name: HOLMES, WANDA
Address: 11415 NW 60 TERR
City-St-Zip: ALACHUA, FL 32615

Title: TSD ( ) Delete
Name: PALENCIA, CHERNITRA S
Address: 4940 NW 51ST PLACE
City-St-Zip: GAINESVILLE, FL 32606

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
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 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: LURETHA M. MINGO VDTS 11/20/2009

Electronic Signature of Signing Officer or Director — Date