

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000135149

FILED  
Oct 28, 2008  
Secretary of State

Entity Name: NUTESTAMENT MINISTRIES INC.

## Current Principal Place of Business:

6109 CARNATION ROAD  
JACKSONVILLE, FL 32209

## New Principal Place of Business:

## Current Mailing Address:

6109 CARNATION ROAD  
JACKSONVILLE, FL 32209

## New Mailing Address:

7199 RUTLAND CT  
JACKSONVILLE, FL 32219

FEI Number: 22-3973719

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: VIC PARTI, ESQ

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DENARD, ALOYSIOUS D  
Address: 6109 CARNATION ROAD  
City-St-Zip: JACKSONVILLE, FL 32209

Title: VSTD ( ) Delete  
Name: HAWKINS, TOSHA L  
Address: 6109 CARNATION ROAD  
City-St-Zip: JACKSONVILLE, FL 32209

Title: D ( ) Delete  
Name: WYCHE, MICHAEL  
Address: 6109 CARNATION ROAD  
City-St-Zip: JACKSONVILLE, FL 32209

Title: D ( ) Delete  
Name: BROWN, COMINTIAN  
Address: 6109 CARNATION ROAD  
City-St-Zip: JACKSONVILLE, FL 32209

Title: D ( ) Delete  
Name: FARMER, CHAD  
Address: 6109 CARNATION ROAD  
City-St-Zip: JACKSONVILLE, FL 32209

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VSTD (X) Change ( ) Addition  
Name: HAWKINS, TOSHA L  
Address: 7199 RUTLAND CT  
City-St-Zip: JACKSONVILLE, FL 32219

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOSHA L. HAWKINS

VSTD

10/28/2008

Electronic Signature of Signing Officer or Director

Date