2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

APPROVED AND FILED

05 AUG 23 PM 3:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. Ecke! AUG 23 2005

DOCUMENT # P29549

1. Entity Name
DESERT MINISTRIES, INC.

Principal Place of Business	Mailing Address
PARAMOUNT BUILDING 139 N COUNTY RD STE 24 PALM BEACH, FL 33480 US	P.OL. BOX 788 PALM BEACH, FL 33480 US

08222005 REIN-NP CR2E099 (6/04) 04-05

2. Principal Place of Business	3. Mailing Address
1312 Matthews Mint Hill Road Suite, Apt. #, etc.	P.O. Box 747 Suite, Apt. #, etc.
City & State: Matthews, NC	City & State: Matthews, NC
Zip: 28105-2306 Country:	Zip: 28106-0747 Country:

4. FEI Number: 25-1423650 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CROMIE, RICHARD M.
ROYAL POLNCIANA CHAPEL
60 COCOANUT ROW
PALM BEACH, FL 33480

7. Name and Address of New Registered Agent

Name: B. ALAN DOBBINS III
Street Address (P.O. Box Number is Not Acceptable): 2601 E. Oakland Park Blvd.
Suite 400
City: Fort Lauderdale FL Zip Code: 33306

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: B. Alan Dobbins III 08-22-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $297.50

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CROMIE, RICHARD M. 25 JAMAICA LN PB, FL 33480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD CROMIE, RICHARD M. 1127 Holleybank Drive MATTHEWS, NC 28105 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ED CROMIE, MARGARET G 139 N. COUNTY ROAD, SUITE 24 PALM BEACH, FL 33480	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ED CROMIE, MARGARET G. 1127 Holleybank Drive MATTHEWS, NC 28105 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DOBBINS, ALAN B 596 W. PALM AIRE DRIVE POMPANO BEACH, FL 33069	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD B. ALAN DOBBINS III 2601 E. OAKLAND PARK Blvd., # 400 Fort Lauderdale, FL 33306 ☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ASTD HALL, WILLIAM E 935 VALLEYVIEW RD. PITTSBURGH, PA 33508	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	500059382555 09/07/05--01016--002 **297.50 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HALL, WILLIAM E. 935 VALLEYVIEW RD. PITTSBURGH, PA 33508	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PATTON, ROBERT F 293 DIXON AVE PITTSBURGH, PA 15216	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PATTON, Robert F. 156 Village Court Pittsburgh, PA 15241 ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: B. Alan Dobbins III 08/22/05 (954) 565-2201
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #