## 2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N03000000341

FILED Oct 09, 2006 Secretary of State

Entity Name: FRIENDS OF FORMAN CHRISTIAN COLLEGE, INC. **Current Principal Place of Business: New Principal Place of Business:** %PEACHTREE PRESBYTERIAN CHURCH 3434 ROSWELL RD. ATLANTA, GA 30305 **Current Mailing Address: New Mailing Address:** %PEACHTREE PRESBYTERIAN CHURCH 3434 ROSWELL RD ATLANTA, GA 30305 FEI Number: 54-2090435 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ARMACOST, PETER H 555 - 5TH AVENUE NE SUITE 914 ST. PETERSBURG, FL 33701 US 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: PETER ARMACOST Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: PSD () Change () Addition () Delete ARMACOST, PETER H Name: Name: 555 - 5TH AVENUE NE, SUITE 914 Address: Address: City-St-Zip: ST. PETERSBURG, FL 33701 City-St-Zip: Title: VD ( ) Delete Title: () Change () Addition Name: STONER, DAVID Name: Address: 1396 N. CRAFTSBURY ROAD Address: City-St-Zip: CRAFTSBURY, VT 05827 City-St-Zip: Title: () Delete Title: () Change () Addition FERGUSON, DUNCAN Name: Name: 4710-D COQUINA KEYS DR. SE Address: Address: City-St-Zip: ST. PETERSBURG, FL 33705 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: PETER ARMACOST DR. 10/09/2006