

# 2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N95000004874

FILED  
Sep 16, 2013  
Secretary of State

**Entity Name:** PLEASANT CITY FAMILY REUNION COMMITTEE, INC.

**Current Principal Place of Business:**

2117 N. DIXIE HWY  
WEST PALM BEACH, FL 33407 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 4727  
WEST PALM BEACH, FL 33402 US

**New Mailing Address:**

P.O. BOX 4724  
WEST PALM BEACH, FL 33402 US

**FEI Number:** 65-0613550

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

CLARKE, EVEREE J  
5600 N FLAGLER DRIVE  
SUITE 2801  
WEST PALM BEACH, FL 33407 US

**Name and Address of New Registered Agent:**

CLARKE, EVEREE J  
5600 N FLAGLER DRIVE  
SUITE 702  
WEST PALM BEACH, FL 33407 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: EVEREE J. CLARKE

09/16/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: CLARKE, EVEREE J  
Address: 5600 N FLAGLER DRIVE, #702  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: S  
Name: WILSON, ELOISE  
Address: 1281 W 1ST STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: T  
Name: PRESTON, DAVID  
Address: 1369 N MANGONIA DR  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D  
Name: GASKIN FITCHUE, LEAH DR  
Address: 1481 DRAGONWYCK CT  
City-St-Zip: BEAVERCREEK, OH 45585

Title: D  
Name: CLARKE, FRANCES Y  
Address: 5600 N. FLAGLER DR, #2801  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: D  
Name: SHERMAN, ESTER  
Address: 9252 OREILY DR  
City-St-Zip: JACKSONVILLE, FL 32210

I hereby 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 all other like empowered.

SIGNATURE: EVEREE J CLARKE

PRES

09/16/2013

Electronic Signature of Signing Officer or Director

Date