2019 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N18000001486

Entity Name: SOJOURNER HOPE ACADEMY INC.

Current Principal Place of Business:

113 S MONROE ST TALLAHASSEE, FL 32301

Current Mailing Address:

3111 MAHAN DR. SUITE 20 TALLAHASSEE, FL 32308

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

JACKSON, ANJELIKA 3539 APALACHEE PARKWAY SUITE 3 TALLAHASSEE, FL 32311 US FILED Oct 23, 2019 Secretary of State 1717222628CR

Certificate of Status Desired: Yes

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.

SIGNATUR	E: ANJELIKA JACKSON			10/23/2019
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRES	Title	VP	
Name	WILLIAMS, MARVIN PHD	Name	JACKSON, ANGELA PHD MBA	ι.
Address	3676 HARTSFIELD RD	Address	3539 APALACHEE PARKWAY	
City-State-Zip:	TALLAHASSEE FL 32318	City-State-Zip:	TALLAHASSEE FL 32311	
Title	SEC	Title	VP	
Name	SMITH, ALEX G	Name	JACKSON, ANJELIKA	
Address	3111 MAHAN DR SUITE 20	Address	113 S MONROE ST	
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32301	
Title	VP	Title	COM	
Name	JARMIN, BRENDA PHD	Name	MADDOX, EVELYN MBA	
Address	3111 MAHAN DR	Address	414 N MERIDIAN ST	
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32301	
Title	VP			
Name	NAAVRA, ORAZO PHD			
Address	4920 ALPHARETTA HWY			
City-State-Zip:	ALPHARETTA GA 30004			

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: ANJELIKA JACKSON

VP

Electronic Signature of Signing Officer/Director Detail