

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 704826

FILED
Nov 05, 2009
Secretary of State

Entity Name: CARVER CITY/LINCOLN GARDENS CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

1512 N CLARK AVE.
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 20123
TAMPA, FL 336221023

New Mailing Address:

P.O. BOX 20123
TAMPA, FL 33622

FEI Number: 59-2869036 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HARVEY, MAURICE
3913 W. PALMETTO STREET
TAMPA, FL 33607 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: MAURICE HARVEY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: RS () Delete
Name: DAVIS, THELMA
Address: 1602 LOIS AVE
City-St-Zip: TAMPA, FL 33607

Title: VP () Delete
Name: ROBERTSON, WILSON JR.
Address: 4221 W. ARCH STREET
City-St-Zip: TAMPA, FL 33607

Title: P () Delete
Name: HARVEY, MAURICE
Address: 3913 W PALMETTO ST
City-St-Zip: TAMPA, FL 33607

Title: T () Delete
Name: SCOTT, THEODORE
Address: 3909 W. ARCH STREET
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: ARMSTONG, ERIC
Address: 4215 W. LASALLE ST
City-St-Zip: TAMPA, FL 33607

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D (X) Change () Addition
Name: LEWIS, RUFUS
Address: 3922 W. LARUEL
City-St-Zip: TAMPA, FL 33607

Title: D () Change (X) Addition
Name: BROWN, CAMILLA
Address: 3909 LASALLE
City-St-Zip: TAMPA, FL 33607

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

SIGNATURE: THEODORE SCOTT

T

11/05/2009

Electronic Signature of Signing Officer or Director

Date