2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 709309				
1. Entity Name TUBMAN-KING COMMUNITY CHURCH, INC.				FILED
				05 OCT 31 PM 5: 20
1090 GEORGE W. ENGRAM BLVD. 1		Mailing Address 1090 GEORGE W. ENG DAYTONA BEACH, FL		SEUNLIANY OF STATE FALLAHASSEE, FLORIDA
2. Principal Place of Business		3. Mailing Address		E 1880 TO 1880 BENTA BETTA BUTTA 1911 BUTTA 1911 BUTTA B
Suite, Apt. #, etc.		Suite, Apt. #, etc.		10062005 REIN-NP CR2E099 (6/04)
City & State		City & State		4. FEI Number Applied For 05-0045067 Not Applicable
Zip	Country	Zīp	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Curren	t Registered Agent	<u> </u>	7. Name and Address of New Registered Agent
t .	DRO PRGE W. ENGRAM BLVD. BEACH, FL 32114		/O City T	gress (P.O. Box Number is Not Acceptable) 90 George W. Engram Blud, autona Beach FL Zip Code 332114
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 proof or printed not a of construction and to if applicable. (NOTE: Registered Agent signature required from remarking) DATE				
FILE NOWIII FEE IS \$236.25 Make check After January 1, 2006, Fee will be \$297.50 Florida Depart				
10.	OFFICERS AND D		· 111.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS	PCD DASH, PEDRO 1090 GEORGE W. ENGRAM BI	Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP	DAYTONA BEACH, FL 32114		CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	TD Delete TAYLOR, MAUREEN S 1090 GEORGE W. ENGRAM BLVD. DAYTONA BEACH, FL 32114		NAME STREET ADDRESS CITY-ST-ZIP	800061039418 10/31/0501015010 **236.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD REDD, STEPHEN 1090 GEORGE W. ENGRAM B DAYTONA BEACH, FL 32114	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-2P	TD WILLIAMS, RODNEY 1090 GEORGE W ENGRAM BL DAYTONA BEACH, FL 32114	☐ Delete VD	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ICA LEWIS 1090 Georgew. ENG Day HAA BEACH,	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP			CITY+ST-ZIP	
CITY-ST-ZIP	d on this report or supplemental report reporation or the receiver or trustee end to or on an attacoment with an address		or the exemption state my signature shall ha rt as required by Chap d.	and in Section 119.07(3)(i), Florida Statutes. I further certify that the information two the same legal effect as if made under oath; that I am an officer or director oter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if