2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 14, 2004
Secretary of State

DOCUMENT# 713051

Entity Name: THE FLORIDA A&M UNIVERSITY NATIONAL ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

ROOM 100, LEE HALL
TALLAHASSEE, FL 32307 US

New Principal Place of Business:

P O BOX 7351
TALLAHASSEE, FL 32314 US

Current Mailing Address:

ROOM 100, LEE HALL
TALLAHASSEE, FL 32307 US

New Mailing Address:

P O BOX 7351
TALLAHASSEE, FL 32314 US

FEI Number: 59-2310040 **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:

JONES, SR., JAMES EARL
ROOM 100, LEE HALL
OFFICE OF ALUMNI AFFAIRS
TALLAHASSEE, FL 32307 US

Name and Address of New Registered Agent:

HUNTER, HENRY
219 EAST VIRGINIA STREET
THE CAMBRIDGE CENTER
TALLAHASSEE, FL 32308 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: HENRY HUNTER 10/14/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: COLLINS, CAROLYN
Address: 4002 LASALLE ST
City-St-Zip: TAMPA, FL 33607

Title: ED ( ) Delete
Name: JONES, SR., JAMES EARL
Address: ROOM 100, LEE HALL
City-St-Zip: TALLAHASSEE, FL 32307 US

Title: V ( ) Delete
Name: PORTER, ROBERT,
Address: 3041 TROUT RIVER BLVD
City-St-Zip: JACKSONVILLE, FL 32208

Title: T ( ) Delete
Name: WALKER, LEILA,
Address: 1381 NANCY DR
City-St-Zip: TALLAHASSEE, FL 32312

Title: S ( ) Delete
Name: GIBBONS, MARIAN
Address: 616 BROOKRIDGE DR.
City-St-Zip: TALLAHASSEE, FL 32310

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: BRYANT, ALVIN
Address: 2000 KECOUGHTAN ROAD
City-St-Zip: HAMPTON, VA 23661

Title: ED (X) Change ( ) Addition
Name: MITCHELL, TOMMY
Address: 2980 RAYMOND DIEHL ROAD
City-St-Zip: TALLAHASSEE, FL 32308 US

Title: V (X) Change ( ) Addition
Name: HARTLEY, BRODES,
Address: 7800 SW 170TH STREET
City-St-Zip: MIAMI, FL 33157

Title: T (X) Change ( ) Addition
Name: JONES-REID, AUDREY,
Address: P O BOX 311613
City-St-Zip: TAMPA, FL 33680

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALVIN BRYANT PD 10/14/2004
Electronic Signature of Signing Officer or Director Date