

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 719891

FILED  
Mar 13, 2009  
Secretary of State

**Entity Name:** FLORIDA CHRISTIAN APARTMENTS, INC.

**Current Principal Place of Business:**

1115 S. EDGEWOOD AVENUE  
JACKSONVILLE, FL 32205 US

**New Principal Place of Business:**

**New Mailing Address:**

303 HEGENBERGER ROAD  
201  
OAKLAND, CA 94621

**Current Mailing Address:**

1115 S. EDGEWOOD AVENUE  
JACKSONVILLE, FL 32205

**FEI Number:** 59-1737422 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
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:**

CHRISTIAN CHURCH HOMES  
1115 S EDGEWOOD AVE  
JACKSONVILLE, FL 32205 US

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

CHRISTIAN CHURCH HOMES  
1115 S. EDGEWOOD AVENUE  
JACKSONVILLE, FL 32205 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: WINTHROP F. MARSHALL

03/13/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: MURRAY, RODGER L  
Address: 5319 SECLUDED OAKS LANE  
City-St-Zip: JACKSONVILLE, FL 32210

Title: P ( ) Delete  
Name: HULL, RICHARD J II  
Address: 2841 RIVERSIDE AVENUE  
City-St-Zip: JACKSONVILLE, FL 32205

Title: VP ( ) Delete  
Name: GEE, KAREY E .L.  
Address: 3520 JACONA DRIVE  
City-St-Zip: JACKSONVILLE, FL 32277

Title: T ( ) Delete  
Name: EDDIE, SHEREE  
Address: 10755 GRAYSON STREET  
City-St-Zip: JACKSONVILLE, FL 32020

**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:

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: WINTHROP F. MARSHALL

VP

03/13/2009

Electronic Signature of Signing Officer or Director

Date