

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 734887

FILED  
Oct 25, 2005  
Secretary of State

**Entity Name:** COMMUNITY OF CONCERNED CITIZENS, INC.

**Current Principal Place of Business:**

ST HEBRON A.M.E. CHURCH  
QUINCY, FL 32352

**New Principal Place of Business:**

**Current Mailing Address:**

329 ROBINSON DR.  
QUINCY, FL 32351

**New Mailing Address:**

FEI Number: 59-3432436      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CUNNINGHAM, REGINALD A  
329 ROBINSON DR.  
QUINCY, FL 32351      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: REGINALD A. CUNNINGHAM

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CUNNINGHAM, REGINALD A  
Address: 329 ROBINSON DR.  
City-St-Zip: QUINCY, FL 32351

Title: V ( ) Delete  
Name: HOUSTON, RUBY  
Address: 134 HOUSTON ROAD  
City-St-Zip: QUINCY, FL 32352

Title: T ( ) Delete  
Name: THOMPSON, ELIZABETH  
Address: 94 JOSEPH WILLIAMS ROAD  
City-St-Zip: QUINCY, FL 32351

Title: S ( ) Delete  
Name: JACKSON, KAREN  
Address: 95 GAMBLE LN  
City-St-Zip: QUINCY, FL 32352

Title: D ( ) Delete  
Name: FITZGERALD, KAREN,  
Address: RT 6 WOODARD RD  
City-St-Zip: QUINCY, FL

Title: D ( ) Delete  
Name: BANKS, BRENDA  
Address: 96 ADOLPHUS BANKS ROAD  
City-St-Zip: QUINCY, FL 32351

**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: ( ) 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 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: REGINALD A. CUNNINGHAM

Electronic Signature of Signing Officer or Director

PD

10/25/2005

Date