

# 2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

04 NOV 22 PM 12:56

DOCUMENT # N00000003542

1. Entity Name

ALVIN D STEWART, JR. MINISTRIES, INC.



Principal Place of Business  
2306 BRYNMAHR  
TALLAHASSEE, FL 32303

Mailing Address  
2306 BRYNMAHR  
TALLAHASSEE, FL 32303



2. Principal Place of Business

2720 Blairstone Rd.

3. Mailing Address

PO Box 5318

Suite, Apt. #, etc.

Bldg. C

Suite, Apt. #, etc.

11162004 REIN-NP

CR2E099 (6/04)

City & State

Tallahassee, FL

City & State

Tallahassee, FL

4. FEI Number

59-3650676

Applied For

Not Applicable

Zip

32301

Country

US

Zip

32314

Country

US

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

STEWART, ALVIN JR  
2306 BRYNMAHR  
TALLAHASSEE, FL 32303

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

6157 Heartland Circle

City

Tallahassee

FL

Zip Code

32312

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

Signature, typed or printed name of registered agent and fee, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

11-15-04

FILE NOW!!! FEE IS \$61.25  
After January 1, 2005, Fee will be \$122.50

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME STEWART, ALVIN JR  
STREET ADDRESS 2306 BRYNMAHR  
CITY-ST-ZIP TALLAHASSEE, FL 32303

TITLE SD ☐ Delete  
NAME STEWART, LISA A  
STREET ADDRESS 2306 BRYNMAHR  
CITY-ST-ZIP TALLAHASSEE, FL 32303

TITLE TD ☐ Delete  
NAME SAMSON, LAWRENCE  
STREET ADDRESS 2131 N MERIDIAN RD #141  
CITY-ST-ZIP TALLAHASSEE, FL 32303

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☒ Change ☐ Addition  
NAME Stewart, Alvin D. Jr.  
STREET ADDRESS 6157 Heartland Circle  
CITY-ST-ZIP Tallahassee, FL 32312

TITLE S ☒ Change ☐ Addition  
NAME Stewart, Lisa A  
STREET ADDRESS 6157 Heartland Circle  
CITY-ST-ZIP Tallahassee, FL 32312

TITLE T ☒ Change ☐ Addition  
NAME Samson, Lawrence  
STREET ADDRESS 2306 Brynmahr Drive  
CITY-ST-ZIP Tallahassee, FL 32303

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

Date

Daytime Phone #

11-15-04

11/17/04