

# 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000005172

**FILED**  
**Sep 15, 2011**  
**Secretary of State**

**Entity Name:** THE COMMUNITY NEIGHBORHOOD RENAISSANCE PARTNERSHIP, INC.

**Current Principal Place of Business:**

300 S ADAMS ST  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

300 S ADAMS ST  
A-23  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

400 CAPITAL CIRCLE, SUITE 18  
#198  
TALLAHASSEE, FL 32308

**New Mailing Address:**

300 S ADAMS ST  
A-23  
TALLAHASSEE, FL 32301

FEI Number: 59-3671241

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORGAN, ROSA  
400 CAPITAL CIRCLE, SUITE 18  
#198  
TALLAHASSEE, FL 32301 US

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

MCNEIL, TERRANCE  
303 MCDANIEL ST  
#11  
TALLAHASSEE, FL 32303 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: TERRANCE MCNEIL

09/15/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ARMSTRONG, KEN  
Address: 307 E 7TH AVENUE  
City-St-Zip: TALLAHASSEE, FL 32303

Title: D  
Name: AMMONS, JAMES  
Address: 1601 MARTIN LUTHER KING JR. BLVD. STE400  
City-St-Zip: TALLAHASSEE, FL 32307

Title: D  
Name: SESSION, JOHNNY  
Address: 300 S. ADAMS ST.  
City-St-Zip: TALLAHASSEE, FL 32301

I hereby 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 all other like empowered.

SIGNATURE: JOHNNY SESSION

D

09/15/2011

Electronic Signature of Signing Officer or Director

Date